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| Fill in this information to identify your case: |                               |                                   |
|---|-------------------------------|-----------------------------------|
| United States Bankruptcy Court for the:         |                               |                                   |
| NORTHERN DISTRICT OF ILLINOIS                   |                               |                                   |
| Case number (if known)                          | Chapter you are filing under: |                                   |
|   | ■ Chapter 7                   |                                   |
|   | ☐ Chapter 11                  |                                   |
|   | ☐ Chapter 12                  |                                   |
|   | ☐ Chapter 13                  | ☐ Check if this an amended filing |

### Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pai | Part 1: Identify Yourself   |   |  |   |  |  |  |
|-----|---|---|--|---|--|--|--|
|     |   | About Debtor 1:                                   |  | About Debtor 2 (Spouse Only in a Joint Case):     |  |  |  |
| 1.  | Your full name  |   |  |   |  |  |  |
|     | Write the name that is on your government-issued picture identification (for example, your driver's               | Xenofon<br>First name                             |  | Stauriani<br>First name                           |  |  |  |
|     | license or passport).   | Middle name                                       |  | Middle name                                       |  |  |  |
|     | Bring your picture identification to your meeting with the trustee.   | Petridis Last name and Suffix (Sr., Jr., II, III) |  | Petridis Last name and Suffix (Sr., Jr., II, III) |  |  |  |
| 2.  | All other names you have used in the last 8 years   |   |  | Stayriani Petridis                                |  |  |  |
|     | Include your married or maiden names.   |   |  |   |  |  |  |
| 3.  | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-0607                                       |  | xxx-xx-4658                                       |  |  |  |

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Debtor 1 Xenofon Petridis
Debtor 2 Stauriani Petridis

Case number (if known)

|  |   | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):  |  |  |
|--|---|---|--|--|--|
| 4. Any business names and<br>Employer Identification<br>Numbers (EIN) you have<br>used in the last 8 years |   | ■ I have not used any business name or EINs.  | ■ I have not used any business name or EINs.   |  |  |
|  | Include trade names and doing business as names | Business name(s)  | Business name(s)   |  |  |
|  |   | EINs  | EINs   |  |  |
| 5.   | Where you live                                  | 915 Madelyn Drive   | If Debtor 2 lives at a different address:  |  |  |
|  |   | Des Plaines, IL 60016  Number, Street, City, State & ZIP Code   | Number, Street, City, State & ZIP Code   |  |  |
|  |   | Cook  |  |  |  |
|  |   | County  | County   |  |  |
|  |   | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |  |  |
|  |   | Number, P.O. Box, Street, City, State & ZIP Code  | Number, P.O. Box, Street, City, State & ZIP Code   |  |  |
| 6.   | Why you are choosing this district to file for  | Check one:  | Check one:   |  |  |
|  | bankruptcy                                      | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                                | Over the last 180 days before filing this petition, I<br>have lived in this district longer than in any other<br>district.                 |  |  |
|  |   | ☐ I have another reason.<br>Explain. (See 28 U.S.C. § 1408.)  | ☐ I have another reason.<br>Explain. (See 28 U.S.C. § 1408.)   |  |  |
|  |   |   |  |  |  |

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|     | btor 2                 | Stauriani Petridis   |                                  |                               |  |  | Case number (if known)  |          |
|-----|------------------------|--|----------------------------------|-------------------------------|--|--|---|----------|
| Do  | O-                     | Tall the Count About   | /a Damlense                      | O-                            |  |  |   |          |
| 7.  | The                    | Tell the Court About \ chapter of the  | Check one. (                     | For a b                       | orief description of each, see Not   |  | oy 11 U.S.C. § 342(b) for Individuals Filing for Banki  | ruptcy   |
|     |                        | Bankruptcy Code you are choosing to file under   |                                  | -                             | go to the top of page 1 and chec   | ck the appropri  | ate box.  |          |
|     |                        |  | ■ Chapter 7                      |                               |  |  |   |          |
|     |                        |  | ☐ Chapter 1                      |                               |  |  |   |          |
|     |                        |  | ☐ Chapter 1                      |                               |  |  |   |          |
|     |                        |  | ☐ Chapter 1                      | 13                            |  |  |   |          |
| 8.  | How                    | you will pay the fee   | about h                          | now yo<br>If your             | u may pay. Typically, if you are p   | paying the fee y   | eck with the clerk's office in your local court for mor<br>yourself, you may pay with cash, cashier's check, on<br>ehalf, your attorney may pay with a credit card or ch  | or money |
|     |                        |  |                                  |                               | the fee in installments. If you e in Installments (Official Form 1   |  | otion, sign and attach the Application for Individuals  | to Pay   |
|     |                        |  | ☐ I reque<br>but is r<br>that ap | est that<br>not requiplies to | It my fee be waived (You may re<br>uired to, waive your fee, and may<br>by your family size and you are ur | equest this option of the sequest this option of the sequestes the seque | ion only if you are filing for Chapter 7. By law, a jud<br>your income is less than 150% of the official povert<br>e fee in installments). If you choose this option, you<br>d (Official Form 103B) and file it with your petition. | y line   |
| 9.  |                        | you filed for  | ■ No.                            |                               |  |  |   |          |
| •-  |                        | bankruptcy within the last 8 years?  | ☐ Yes.                           |                               |  |  |   |          |
|     |                        | •  | _                                | istrict                       | V  | Vhen   | Case number   |          |
|     |                        |  | D                                | istrict                       |  | Vhen   |   |          |
|     |                        |  | D                                | istrict                       |  | Vhen   | Case number   |          |
| 10. |                        | any bankruptcy   | ■ No                             |                               |  |  |   |          |
|     | filed<br>not f<br>you, | s pending or being by a spouse who is iling this case with or by a business ner, or by an ate? | ☐ Yes.                           |                               |  |  |   |          |
|     |                        |  | D                                | ebtor                         |  |  | Relationship to you   |          |
|     |                        |  | D                                | istrict                       | V  | Vhen   | Case number, if known   |          |
|     |                        |  | D                                | ebtor                         |  |  | Relationship to you   |          |
|     |                        |  | D                                | istrict                       | V  | Vhen   | Case number, if known   |          |
| 11. |                        | ou rent your   | ■ No.                            | Go to li                      | ine 12.  |  |   |          |
|     | resid                  | lence?   | ☐ Yes.                           | Has yo                        | ur landlord obtained an eviction   | udgment again  | nst you and do you want to stay in your residence?  |          |
|     |                        |  |                                  |                               | No. Go to line 12.   |  |   |          |
|     |                        |  | I                                |                               | Yes. Fill out <i>Initial Statement All</i> bankruptcy petition.  | oout an Evictior   | n Judgment Against You (Form 101A) and file it wit  | h this   |

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| Deb | otor 2 Stauriani Petridis   |                    |   | Case number (if known)   |
|-----|---|--------------------|---|--|
|     |   |                    |   |  |
| Par | t 3: Report About Any Bu  | sinesses           | You Own as a Sole Propri                            | etor   |
| 12. | Are you a sole proprietor of any full- or part-time business?   | ■ No.              | Go to Part 4.                                       |  |
|     |   | ☐ Yes.             | Name and location of bu                             | usiness  |
|     | A sole proprietorship is a<br>business you operate as<br>an individual, and is not a<br>separate legal entity such<br>as a corporation,<br>partnership, or LLC. |                    | Name of business, if an                             | y  |
|     | If you have more than one sole proprietorship, use a separate sheet and attach  |                    | Number, Street, City, St                            | ate & ZIP Code   |
|     | it to this petition.  |                    | Check the appropriate b                             | oox to describe your business:   |
|     |   |                    | ☐ Health Care Bus                                   | siness (as defined in 11 U.S.C. § 101(27A))  |
|     |   |                    | ☐ Single Asset Re                                   | al Estate (as defined in 11 U.S.C. § 101(51B))   |
|     |   |                    | ☐ Stockbroker (as                                   | defined in 11 U.S.C. § 101(53A))   |
|     |   |                    | ☐ Commodity Brok                                    | xer (as defined in 11 U.S.C. § 101(6))   |
|     |   |                    | ☐ None of the abo                                   | ve   |
| 13. | Are you filing under<br>Chapter 11 of the<br>Bankruptcy Code and are<br>you a small business<br>debtor?   | deadline operation | s. If you indicate that you are                     | e court must know whether you are a small business debtor so that it can set appropriate e a small business debtor, you must attach your most recent balance sheet, statement of dederal income tax return or if any of these documents do not exist, follow the procedure |
|     | For a definition of small   | ■ No.              | I am not filing under Cha                           | apter 11.  |
|     | business debtor, see 11 U.S.C. § 101(51D).  | □ No.              | I am filing under Chapte Code.                      | er 11, but I am NOT a small business debtor according to the definition in the Bankruptcy  |
|     |   | ☐ Yes.             | I am filing under Chapte                            | er 11 and I am a small business debtor according to the definition in the Bankruptcy Code.   |
| Par | t 4: Report if You Own or   | · Have Any         | / Hazardous Property or A                           | ny Property That Needs Immediate Attention   |
| 14. | Do you own or have any  | ■ No.              |   |  |
|     | property that poses or is alleged to pose a threat  | □ Yes.             |   |  |
|     | of imminent and identifiable hazard to  | □ res.             | What is the hazard?                                 |  |
|     | public health or safety?  |                    |   |  |
|     | Or do you own any property that needs immediate attention?  |                    | If immediate attention is needed, why is it needed? |  |
|     | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?   |                    | Where is the property?                              |  |
|     | <b>,</b> , ,  |                    |   | Number, Street, City, State & Zip Code   |
|     |   |                    |   |  |

Debtor 1

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**Xenofon Petridis** Debtor 1 Debtor 2 Stauriani Petridis Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

#### 15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes

me incapable of realizing or making rational decisions about finances.

My physical disability causes Disability. П

me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

П Active duty. I am currently on active military duty in a military

combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of:                               |

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

My physical disability causes me to Disability.

be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried

to do so.

Active duty. I am currently on active military duty

in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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|     | tor 1<br>tor 2  | Xenofon Petridis<br>Stauriani Petridis                 |                            | Doddinent   | Case n  | number (if known)  |    |  |  |
|-----|---|--|----------------------------|---|---|--|----|--|--|
| Par | t 6:  | Answer These Questi                                    | ons for Repo               | orting Purposes   |   |  |    |  |  |
| 16. |   | t kind of debts do<br>have?                            | in                         | Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."  ☐ No. Go to line 16b. |   |  |    |  |  |
|     |   |  |                            | Yes. Go to line 17.   |   |  |    |  |  |
|     |   |  | 16b. <b>A</b> ı            |   |   | debts that you incurred to obtain he business or investment.                                 |    |  |  |
|     |   |  |                            | No. Go to line 16c.   |   |  |    |  |  |
|     |   |  |                            | Yes. Go to line 17.   |   |  |    |  |  |
|     |   |  | 16c. St                    | ate the type of debts you owe th  | at are not consumer debts or b                                | ousiness debts   |    |  |  |
| 17. |   | ou filing under<br>oter 7?                             | □ No. I a                  | am not filing under Chapter 7. Go   | o to line 18.   |  |    |  |  |
|     | after<br>prop   | ou estimate that<br>any exempt<br>erty is excluded and |                            | am filing under Chapter 7. Do yo<br>penses are paid that funds will b   |   | pt property is excluded and administrative ecured creditors?                                 |    |  |  |
|     |   | administrative expenses are paid that funds will       |                            | No  |   |  |    |  |  |
|     | be available for distribution to unsecured creditors? |  | Yes                        |   |   |  |    |  |  |
| 18. | How many Creditors do                                 | <b>1</b> -49   |                            | □ 1,000-5,000   | <b>2</b> 5,001-50,000   |  |    |  |  |
|     |   | you estimate that you owe?                             | ☐ 50-99                    |   | ☐ 5001-10,000<br>☐ 10,001-25,000                              | ☐ 50,001-100,000<br>☐ More than100,000   |    |  |  |
|     | □ 100-199<br>□ 200-999                                |  |                            | 10,001-25,000   | □ More triam too,000  |  |    |  |  |
| 19. |   | much do you  | □ \$0 - \$50,              | 000   | ☐ \$1,000,001 - \$10 million                                  | □ \$500,000,001 - \$1 billion  |    |  |  |
|     |   | nate your assets to orth?                              | \$50,001                   |   | □ \$10,000,001 - \$50 million                                 |  |    |  |  |
|     |   |  | ■ \$100,001<br>□ \$500,001 |   | □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 millio |  |    |  |  |
| 20. |   | much do you  | <b>□</b> \$0 - \$50,       | 000   | □ \$1,000,001 - \$10 million                                  | □ \$500,000,001 - \$1 billion  |    |  |  |
|     | to be   | nate your liabilities<br>e?                            | \$50,001                   |   | □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million  | _ ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '  |    |  |  |
|     |   |  | ■ \$100,001<br>□ \$500,001 |   | □ \$100,000,001 - \$100 million                               |  |    |  |  |
| Par | t 7:  | Sign Below   |                            |   |   |  |    |  |  |
| For | you   |  | I have exam                | ined this petition, and I declare u   | under penalty of perjury that the                             | e information provided is true and correct.  |    |  |  |
|     |   |  |                            |   |   | eligible, under Chapter 7, 11,12, or 13 of title 1 and I choose to proceed under Chapter 7.  | 1, |  |  |
|     |   |  |                            | y represents me and I did not pa<br>have obtained and read the noti   |   | o is not an attorney to help me fill out this 2(b).  |    |  |  |
|     |   |  | I request rel              | ief in accordance with the chapte   | er of title 11, United States Code                            | le, specified in this petition.  |    |  |  |
|     |   |  |                            | case can result in fines up to \$25   |   | oney or property by fraud in connection with a to 20 years, or both. 18 U.S.C. §§ 152, 1341, |    |  |  |
|     |   |  | /s/ Xenofo                 | n Petridis  | /s/ Staurian  |  |    |  |  |
|     |   |  | Xenofon P<br>Signature of  |   | <b>Stauriani P</b><br>Signature of I                          |  |    |  |  |
|     |   |  | Executed or                | January 25, 2016<br>MM / DD / YYYY  | Executed on   | <u>January 25, 2016</u><br>MM / DD / YYYY  |    |  |  |

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|----------------------|--|--|---------------------------|-----------------------------|----------------------------|
| Debtor 1<br>Debtor 2 | Xenofon Petridis Stauriani Petridis                    |  | Ca                        | se number (if known)        |                            |
|                      |  |  |                           |                             |                            |
| •                    | attorney, if you are<br>ted by one                     | I, the attorney for the debtor(s) named in this under Chapter 7, 11, 12, or 13 of title 11, Uni for which the person is eligible. I also certify | ted States Code, and have | explained the relief availa | able under each chapter    |
| •                    | e not represented by<br>ey, you do not need<br>s page. | 342(b) and, in a case in which § 707(b)(4)(D in the schedules filed with the petition is income.   |                           | no knowledge after an in    | quiry that the information |
|                      |  | /s/ Stephen S. Newland   | Date                      | January 25, 2016            |                            |
|                      |  | Signature of Attorney for Debtor   |                           | MM / DD / YYYY              |                            |
|                      |  | Stephen S. Newland   |                           |                             |                            |
|                      |  | Printed name   |                           |                             |                            |
|                      |  | Newland & Newland, LLP   |                           |                             |                            |
|                      |  | Firm name  |                           |                             |                            |
|                      |  | 1512 Artaius Parkway, Ste. 300   |                           |                             |                            |
|                      |  | Libertyville, IL 60048   |                           |                             |                            |
|                      |  | Number Street City State & ZIP Code  |                           |                             |                            |

Email address

Contact phone (847) 549-0000

**6207458**Bar number & State

steve@newlandlaw.com

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|   |                         | Docum             |             |     |
|---|-------------------------|-------------------|-------------|-----|
| Fill in this infor                      | mation to identify your | case:             |             |     |
| Debtor 1                                | Xenofon Petridis        |                   |             |     |
|   | First Name              | Middle Name       | Last Name   |     |
| Debtor 2                                | Stauriani Petridis      |                   |             |     |
| (Spouse if, filing)                     | First Name              | Middle Name       | Last Name   |     |
| United States Bankruptcy Court for the: |                         | NORTHERN DISTRICT | OF ILLINOIS |     |
| Case number                             |                         |                   |             |     |
| (if known)                              |                         |                   |             | □ □ |
|   |                         |                   |             | a   |

Check if this is an amended filing

### Official Form 106Sum

# Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

|     |  | Your a      | ssets<br>of what you own |
|-----|--|-------------|--------------------------|
| 1.  | Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B  | \$          | 215,000.00               |
|     | 1b. Copy line 62, Total personal property, from Schedule A/B   | \$          | 123,393.88               |
|     | 1c. Copy line 63, Total of all property on Schedule A/B  | \$          | 338,393.88               |
| Par | t 2: Summarize Your Liabilities  |             |                          |
|     |  |             | iabilities<br>nt you owe |
| 2.  | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$          | 217,257.00               |
| 3.  | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                           | \$          | 0.00                     |
|     | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  | \$          | 32,665.93                |
|     | Your total liabilities   | \$          | 249,922.93               |
| Par | t 3: Summarize Your Income and Expenses  |             |                          |
| 4.  | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I  | \$          | 2,683.66                 |
| 5.  | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J  | \$          | 3,694.56                 |
| Par | t 4: Answer These Questions for Administrative and Statistical Records   |             |                          |
| 6.  | Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you                     | ur other so | chedules.                |
|     | ■ Yes What kind of debt do you have?   |             |                          |

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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|----------|--------------------|----------|------------------------|--|
|          | Xenofon Petridis   |          | 9                      |  |
| Debtor 2 | Stauriani Petridis |          | Case number (if known) |  |

| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. | \$<br>2,782.63 |
|----|--|----------------|
|    |  |                |

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

|  | Tot  | al claim |
|--|------|----------|
| From Part 4 on Schedule E/F, copy the following:   |      |          |
| 9a. Domestic support obligations (Copy line 6a.)   | \$_  | 0.00     |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$_  | 0.00     |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$_  | 0.00     |
| 9d. Student loans. (Copy line 6f.)   | \$_  | 0.00     |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$_  | 0.00     |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$_ | 0.00     |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$   | 0.00     |

|      | Case 1                     | L6-0239                               | 4 Doc 1                |                  | 01/27/16<br>ument              | Entered 01/27/3<br>Page 10 of 54  | 16 10:05:       | 36 De                        | sc Main   |
|------|----------------------------|---------------------------------------|------------------------|------------------|--------------------------------|---|-----------------|------------------------------|---|
|      | in this information        | n to identify<br>enofon Pet           |                        |                  |                                |   |                 |                              |   |
|      | otor 2 St                  | t Name<br><b>auriani Pe</b><br>t Name | tridis                 | e Name<br>e Name |                                | Last Name   |                 |                              |   |
| Unit | ted States Bankrupt        | tcy Court for                         | the: NORTHER           | N DISTI          | RICT OF ILLIN                  | IOIS  |                 |                              |   |
| Cas  | se number                  |                                       |                        |                  |                                |   |                 |                              | Check if this is an amended filing                |
| _    | ficial Form                | _                                     | _                      |                  |                                |   |                 |                              |   |
|      | chedule A                  |                                       |                        |                  |                                |   |                 |                              | 12/15   |
| fits | best. Be as complet        | e and accura                          | te as possible. If tw  | o marrie         | d people are fili              | asset fits in more than one<br>ng together, both are equall<br>tional pages, write your nan | y responsible   | for supplying                | correct information. If                           |
| Part | 1: Describe Each R         | Residence, Bu                         | uilding, Land, or Oth  | ner Real I       | Estate You Own                 | or Have an Interest In  |                 |                              |   |
| . Do | o you own or have an       | y legal or equ                        | uitable interest in ar | ny reside        | nce, building, la              | and, or similar property?   |                 |                              |   |
|      | No. Go to Part 2.          |                                       |                        |                  |                                |   |                 |                              |   |
|      | Yes. Where is the pr       | operty?                               |                        |                  |                                |   |                 |                              |   |
|      |                            |                                       |                        |                  |                                |   |                 |                              |   |
| 1.1  |                            |                                       |                        | What             | is the property                | ? Check all that apply  |                 |                              |   |
|      | 915 Madelyn Di             |                                       |                        |                  | Single-family h                | ome   |                 |                              | aims or exemptions. Put the                       |
|      | Street address, if availal | ble, or other des                     | scription              |                  | Duplex or multi<br>Condominium | <del>-</del>  |                 |                              | aims on Schedule D:<br>ns Secured by Property.    |
|      | Des Plaines                | IL                                    | 60016-0000             |                  | Manufactured of Land           | or mobile home  | Current val     |                              | Current value of the portion you own?             |
|      | City                       | State                                 | ZIP Code               |                  | Investment pro                 | perty   | \$21            | 5,000.00                     | \$215,000.00                                      |
|      |                            |                                       |                        |                  | Timeshare<br>Other             |   | (such as fe     | e simple, ten                | our ownership interest ancy by the entireties, or |
|      |                            |                                       |                        | _                |                                | in the property? Check one  |                 | e), if known.<br>by the En   |   |
|      | Cook                       |                                       |                        |                  | Debtor 1 only<br>Debtor 2 only |   | Teriancy        | ~y                           | un oty  |
|      | County                     |                                       |                        |                  | Debtor 1 and D                 | ebtor 2 only  |                 |                              |   |
|      | -                          |                                       |                        |                  |                                | the debtors and another   |                 | if this is com<br>tructions) | nmunity property                                  |
|      |                            |                                       |                        | Other            |                                | u wish to add about this ite  | m, such as loca | al                           |   |

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$215,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

**Personal Residence** 

Official Form 106A/B Schedule A/B: Property page 1

Case 16-02394 Doc 1 Filed 01/27/16 Entered 01/27/16 10:05:36 Desc Main Document Page 11 of 54 Debtor 1 Xenofon Petridis Debtor 2 Stauriani Petridis Case number (if known) 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put **Toyota** Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: 4Runner Model Debtor 1 only Creditors Who Have Claims Secured by Property. Year: 2007 Debtor 2 only Current value of the Current value of the 89000 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: ☐ At least one of the debtors and another Fair condition. \$10,433.00 \$10,433.00 ☐ Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put Ford Who has an interest in the property? Check one 3.2 Make: the amount of any secured claims on Schedule D: Cargo Van 350 Creditors Who Have Claims Secured by Property. Model: ■ Debtor 1 only 2002 Year: Debtor 2 only Current value of the Current value of the 88000 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: ☐ At least one of the debtors and another fair condition Value per \$2,420.00 \$2,420.00 **Edmunds** ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$12,853.00 pages you have attached for Part 2. Write that number here.....= Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... Regular and Customary Furniture, Home furnishings, Appliances, \$2,000.00 Kitchenware, Home electronics; Household goods and sundries 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe.... \$500.00 Television, peripherals, customary older electronics

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

No

☐ Yes. Describe.....

Entered 01/27/16 10:05:36 Case 16-02394 Doc 1 Filed 01/27/16 Desc Main Document Page 12 of 54 Debtor 1 Xenofon Petridis Debtor 2 Stauriani Petridis Case number (if known) 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$400.00 **Usual and Necessary Wearing Apparel** 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver Yes. Describe..... Costume jewelry, no precious metals or gemstones. \$200.00 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$3,100.00 for Part 3. Write that number here ..... Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No ■ Yes..... Cash on hand or in debtor's \$40.00 possession 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: Yes.....

Chase

**Checking Account** 

#5319

17.1.

\$2,325.02

Case 16-02394 Doc 1 Filed 01/27/16 Entered 01/27/16 10:05:36 Desc Main Document Page 13 of 54 Debtor 1 Xenofon Petridis Stauriani Petridis Debtor 2 Case number (if known) 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: 401(k) **T Rowe Price** \$31,253.24 Pension at retirement **Federal Mogul** \$59,000.00 **IRA Annuity Jackson National Life** \$12,822.62 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them...

#### 27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

■ No

☐ Yes. Give specific information about them...

Money or property owed to you?

Current value of the portion you own?

Do not deduct secured claims or exemptions.

|                      |   | oc 1 Filed 01/27/16<br>Document                                      | Entered 01/27<br>Page 14 of 54           | 7/16 10:05:36             | Desc Main                  |
|----------------------|---|--|--|---------------------------|----------------------------|
| Debtor 1<br>Debtor 2 | Xenofon Petridis Stauriani Petridis   |  | C  | Case number (if known)    |                            |
| ☐ No                 | funds owed to you  Give specific information about  | them including whether you alre                                      | eady filed the returns an                | nd the tay vears          |                            |
| _ 100.               | . Give specific information about   |  |  | 1                         |                            |
|                      |   | 2015 anticipated refund \$2000 or less.                              | approximately                            | Federal                   | \$2,000.00                 |
| ■ No                 | y support  ples: Past due or lump sum alim  Give specific information   | ony, spousal support, child supp                                     | ort, maintenance, divor                  | ce settlement, propert    | y settlement               |
| Exam                 | amounts someone owes you uples: Unpaid wages, disability insbenefits; unpaid loans you  . Give specific information |  | efits, sick pay, vacation                | n pay, workers' compe     | ensation, Social Security  |
| 31. Interes<br>Exam  | sts in insurance policies  ples: Health, disability, or life ins  |  | HSA); credit, homeowr                    | ner's, or renter's insura | ance                       |
| ☐ Yes.               | Name the insurance company of Company   |  | Beneficiar                               | y:                        | Surrender or refund value: |
| If you some          | are the beneficiary of a living tru<br>one has died.  Give specific information                                     | rou from someone who has die<br>st, expect proceeds from a life in   | ed<br>asurance policy, or are o          | currently entitled to red | ceive property because     |
| Exam<br>■ No         | s against third parties, whethe ples: Accidents, employment dis  Describe each claim                                | r or not you have filed a lawsu<br>putes, insurance claims, or right | <b>it or made a demand</b> s<br>s to sue | for payment               |                            |
| □ No                 | contingent and unliquidated c   | laims of every nature, includin                                      | g counterclaims of th                    | e debtor and rights t     | o set off claims           |
| ■ Yes.               | . Describe each claim   | Workers Compensation ca<br>Currently being paid in lieu<br>unknown.  |  |                           | Unknown                    |
| ■ No                 | nancial assets you did not alre   | ady list   |  |                           |                            |
|                      | the dollar value of all of your e<br>art 4. Write that number here  | ,  |  | ou have attached          | \$107,440.88               |
| Part 5: De           | escribe Any Business-Related Prop   | erty You Own or Have an Interest In                                  | ı. List any real estate in P             | art 1.                    |                            |
|                      | own or have any legal or equitable io to Part 6.  | interest in any business-related pro                                 | perty?                                   |                           |                            |
| П Yes (              | Go to line 38   |  |  |                           |                            |

Official Form 106A/B

Schedule A/B: Property

Case 16-02394 Doc 1 Filed 01/27/16 Entered 01/27/16 10:05:36 Desc Main Page 15 of 54 Document Debtor 1 **Xenofon Petridis** Debtor 2 Stauriani Petridis Case number (if known) Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Current value of the portion you own? Do not deduct secured claims or exemptions. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ...... \$0.00 List the Totals of Each Part of this Form Part 1: Total real estate, line 2 \$215,000.00 56. Part 2: Total vehicles, line 5 \$12,853.00 Part 3: Total personal and household items, line 15 \$3,100.00 57. Part 4: Total financial assets, line 36 58. \$107,440.88 Part 5: Total business-related property, line 45 \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$123.393.88 Copy personal property total \$123,393.88

Official Form 106A/B

Schedule A/B: Property

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$338,393.88

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|                     |                          | Docume            | 1 44C 1C CI 37 |                                      |
|---------------------|--------------------------|-------------------|----------------|--------------------------------------|
| Fill in this infor  | mation to identify your  | case:             |                |                                      |
| Debtor 1            | Xenofon Petridis         |                   |                |                                      |
|                     | First Name               | Middle Name       | Last Name      |                                      |
| Debtor 2            | Stauriani Petridis       | ;                 |                |                                      |
| (Spouse if, filing) | First Name               | Middle Name       | Last Name      |                                      |
| United States Ba    | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS    |                                      |
| Case number         |                          |                   |                |                                      |
| (II KNOWN)          |                          |                   |                | ☐ Check if this is an amended filing |

#### Official Form 106C

# Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on<br>Schedule A/B that lists this property  | Current value of the portion you own                            | Amount of the exemption you claim |   | Specific laws that allow exemption |  |
|---|---|-----------------------------------|---|------------------------------------|--|
|   | Copy the value from<br>Schedule A/B                             | Che                               | eck only one box for each exemption.                            |                                    |  |
| 915 Madelyn Drive Des Plaines, IL<br>60016 Cook County                                  | \$215,000.00  |                                   | \$5,969.00  | 735 ILCS 5/12-901                  |  |
| Personal Residence Line from Schedule A/B: 1.1  |   |                                   | 100% of fair market value, up to any applicable statutory limit |                                    |  |
| 2007 Toyota 4Runner 89000 miles   | \$10,433.00   |                                   | \$2,207.00  | 735 ILCS 5/12-1001(c)              |  |
| Line from Schedule A/B: 3.1   | 100% of fair market value, up to any applicable statutory limit |                                   | · •   |                                    |  |
| 2002 Ford Cargo Van 350 88000<br>miles  | \$2,420.00  |                                   | \$2,420.00  | 735 ILCS 5/12-1001(b)              |  |
| fair condition Value per Edmunds Line from Schedule A/B: 3.2                            |   |                                   | 100% of fair market value, up to any applicable statutory limit |                                    |  |
| Regular and Customary Furniture,<br>Home furnishings, Appliances,                       | \$2,000.00  |                                   | \$514.98  | 735 ILCS 5/12-1001(b)              |  |
| Kitchenware, Home electronics; Household goods and sundries Line from Schedule A/B: 6.1 |   |                                   | 100% of fair market value, up to any applicable statutory limit |                                    |  |
| Television, peripherals, customary  | \$500.00  |                                   | \$500.00  | 735 ILCS 5/12-1001(b)              |  |
| older electronics Line from Schedule A/B: 7.1   | ·   |                                   | 100% of fair market value, up to any applicable statutory limit |                                    |  |

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Debtor 1 Debtor 2 Stauriani Petridis Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B **Usual and Necessary Wearing** 735 ILCS 5/12-1001(a) \$400.00 \$400.00 Apparel 100% of fair market value, up to Line from Schedule A/B: 11.1 any applicable statutory limit Costume jewelry, no precious metals 735 ILCS 5/12-1001(b) \$200.00 \$200.00 or gemstones. 100% of fair market value, up to Line from Schedule A/B: 12.1 any applicable statutory limit Cash on hand or in debtor's 735 ILCS 5/12-1001(b) \$40.00 \$40.00 possession Line from Schedule A/B: 16.1 П 100% of fair market value, up to any applicable statutory limit Checking Account #5319: Chase 735 ILCS 5/12-1001(b) 100% \$2,325.02 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit 401(k): T Rowe Price 735 ILCS 5/12-1006 \$31,253.24 \$31,253.24 Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit Pension at retirement: Federal Mogul 735 ILCS 5/12-1006 \$59,000.00 \$59,000.00 Line from Schedule A/B: 21.2 100% of fair market value, up to any applicable statutory limit **IRA Annuity: Jackson National Life** 735 ILCS 5/12-1006 \$12,822.62 \$12,822.62 Line from Schedule A/B: 21.3 100% of fair market value, up to any applicable statutory limit Federal: 2015 anticipated refund 735 ILCS 5/12-1001(b) \$2,000.00 \$2,000.00 approximately \$2000 or less. Line from Schedule A/B: 28.1 100% of fair market value, up to any applicable statutory limit **Workers Compensation case** 820 ILCS 305/21 100% Unknown following back surgery. Currently being paid in lieu of salary. 100% of fair market value, up to Contingent claim value unknown. any applicable statutory limit Line from Schedule A/B: 34.1 Are you claiming a homestead exemption of more than \$155,675? (Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No Yes

**Xenofon Petridis** 

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|   |                      | Document   | Page 18 α            | of 54                           |                         |                      |
|---|----------------------|--|----------------------|---------------------------------|-------------------------|----------------------|
| Fill in this informa  | tion to identify you | ır case:   |                      |                                 |                         |                      |
| Debtor 1  | Xenofon Petridi      | 'e   |                      |                                 |                         |                      |
| Debtor 1  | First Name           | Middle Name  | Last Name            |                                 |                         |                      |
| Debtor 2  | Stauriani Petrid     | is   |                      |                                 |                         |                      |
| (Spouse if, filing)   | First Name           | Middle Name  | Last Name            |                                 | -                       |                      |
| United States Bankı   | ruptcy Court for the | : NORTHERN DISTRICT OF ILL   | INOIS                |                                 |                         |                      |
|   |                      |  |                      |                                 | -                       |                      |
| Case number   |                      |  |                      |                                 | □ Chook                 | if this is an        |
| ()  |                      |  |                      |                                 | _                       | ded filing           |
|   |                      |  |                      |                                 | union                   | ica ming             |
| Official Form   | 106D                 |  |                      |                                 |                         |                      |
| Schedule D  | : Creditors          | Who Have Claims  | Secured              | by Propert                      | V                       | 12/15                |
|   |                      |  |                      |                                 | <u> </u>                |                      |
|   |                      | f two married people are filing together<br>, number the entries, and attach it to th      |                      |                                 |                         |                      |
| . Do any creditors have                                     | e claims secured by  | your property?   |                      |                                 |                         |                      |
| ☐ No. Check th  | is box and submit t  | his form to the court with your other  | r schedules. You     | u have nothing else             | to report on this form. |                      |
| _   | I of the information | •  |                      | <b>.</b>                        |                         |                      |
|   |                      | below.   |                      |                                 |                         |                      |
|   | secured Claims       |  |                      | Column A                        | Column B                | Column C             |
|   |                      | nore than one secured claim, list the creditarticular claim, list the other creditors in F |                      | Amount of claim                 | Value of collateral     | Unsecured            |
|   |                      | er according to the creditor's name.   | a. (21 / 10 111 doi: | Do not deduct the               | that supports this      | portion              |
| 2.1 Huntington  | Natl Rk              | Describe the property that secures the   | he claim:            | value of collateral. \$8,226.00 | claim<br>\$10,433.00    | If any <b>\$0.00</b> |
| Creditor's Name   | Tutti Dit            | 2007 Toyota 4Runner  |                      | ψο,220.00                       | Ψ10,400.00              | Ψ0.00                |
|   |                      | 2007 Toyota 4rtainioi  |                      |                                 |                         |                      |
| Bankruptcy  | Notice               | As of the data you file the alaim is o   | 26 10 - 11 46 - 4    |                                 |                         |                      |
| Po Box 8942   |                      | As of the date you file, the claim is: Capply.   | neck all that        |                                 |                         |                      |
| Cleveland, C  | OH 44101             | ☐ Contingent   |                      |                                 |                         |                      |
| Number, Street, Cit   | y, State & Zip Code  | Unliquidated   |                      |                                 |                         |                      |
| Who owes the debt   | Charle and           | Disputed   |                      |                                 |                         |                      |
| Who owes the debt'  Debtor 1 only                           | r Check one.         | Nature of lien. Check all that apply.  |                      |                                 |                         |                      |
| _   |                      |  | nortgage or secure   | eu                              |                         |                      |
| <ul><li>Debtor 2 only</li><li>Debtor 1 and Debtor</li></ul> | ur 2 only            | ☐ Statutory lien (such as tax lien, mec  | shania'a lian)       |                                 |                         |                      |
| ☐ At least one of the o                                     | •                    | ☐ Judgment lien from a lawsuit   | rianic's lien)       |                                 |                         |                      |
| ☐ Check if this claim                                       |                      | · ·  | Auto Ioan            |                                 |                         |                      |
| community debt  |                      | — Other (including a right to onset)   |                      |                                 |                         |                      |
|   | Opened 5/01/11       |  |                      |                                 |                         |                      |
|   | Last Active          |  |                      |                                 |                         |                      |
| Date debt was incurre                                       |                      | Last 4 digits of account numb  | <sub>oer</sub> 5290  |                                 |                         |                      |
|   |                      |  |                      |                                 |                         |                      |
| 2.2 MB Financia   | al Bank              | Describe the property that secures the   | he claim:            | \$38,000.00                     | \$215,000.00            | \$0.00               |
| Creditor's Name   |                      | 915 Madelyn Drive Des Plain  | nes, IL              | · ,                             |                         |                      |
|   |                      | 60016 Cook County  |                      |                                 |                         |                      |
|   |                      | Personal Residence   | 26 10 - 11 46 - 4    |                                 |                         |                      |
| 6111 N Rive   |                      | As of the date you file, the claim is: Capply.   | neck all that        |                                 |                         |                      |
| Des Plaines   | , IL 60018           | ☐ Contingent   |                      |                                 |                         |                      |
| Number, Street, Cit   | y, State & Zip Code  | Unliquidated   |                      |                                 |                         |                      |
| Who owes the debt   | Chack and            | ☐ Disputed  Nature of lien. Check all that apply.  |                      |                                 |                         |                      |
|   | E OHECK UHE.         |  |                      |                                 |                         |                      |
| Debtor 1 only   |                      | An agreement you made (such as n car loan)   | nortgage or secure   | ea                              |                         |                      |
| ☐ Debtor 2 only ☐ Debtor 1 and Debtor                       | ur 2 only            | Statutory lien (such as tax lien, mec  | shanio's lian        |                                 |                         |                      |
| - Deploi I and Depto  | ıı ∠ UIIIV           | Judiciory lien (Such as lax lien, mec)   | Harlic S IIC(1)      |                                 |                         |                      |

☐ Judgment lien from a lawsuit

 $\hfill \square$  At least one of the debtors and another

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| Debtor 1 Xenofon P   | etridis                                      |   | Cas            | se number (if know) |              |        |
|--|--|---|----------------|---------------------|--------------|--------|
| First Name   | Middle N                                     | ame Last Name   |                |                     |              |        |
| Debtor 2 Stauriani F   | Petridis<br>Middle N                         | ame Last Name   |                |                     |              |        |
| First Name   | Middle N                                     | arne Last Name  |                |                     |              |        |
| Check if this claim relacement   | ates to a                                    | Other (including a right to offset)   |                |                     |              |        |
| Date debt was incurred   | 2009   | Last 4 digits of account number   | 3313           |                     |              |        |
| 2.3 Ocwen Loan S   | ervicing                                     | Describe the property that secures the cla  | aim:           | \$162,062.00        | \$215,000.00 | \$0.00 |
| Creditor's Name PO Box 24738   |  | Single Family Personal Resider<br>at 915 Modelyn Drive, Des Plain<br>IL 60016   |                |                     |              |        |
| West Palm Bea<br>33416-4738  | ıch, FL                                      | As of the date you file, the claim is: Check apply.  Contingent   | all that       |                     |              |        |
| Number, Street, City, St   | ate & Zip Code                               | ☐ Unliquidated  |                |                     |              |        |
| Who owes the debt? Ch  | neck one.                                    | ☐ Disputed  Nature of lien. Check all that apply.   |                |                     |              |        |
| ■ Debtor 1 only ■ Debtor 2 only  |  | ☐ An agreement you made (such as mortg car loan)  | age or secured | i                   |              |        |
| Debtor 1 and Debtor 2 of   | only   | ☐ Statutory lien (such as tax lien, mechanic  | c's lien)      |                     |              |        |
| ☐ At least one of the debte  | ors and another                              | ☐ Judgment lien from a lawsuit  |                |                     |              |        |
| Check if this claim relacement community debt                          | ates to a                                    | Other (including a right to offset)   | st Mortgag     | е                   |              |        |
| Date debt was incurred   | Opened<br>12/30/04<br>Last Active<br>1/16/15 | Last 4 digits of account number   | 9520           |                     |              |        |
| 2.4 Specialized Lo   | an Servi                                     | Describe the property that secures the cl   | aim:           | \$8,969.00          | \$215,000.00 | \$0.00 |
| Creditor's Name Attn: Bankrupt 8742 Lucent Bl 300 Highlands Ran 80129  | vd. Suite                                    | 915 Madelyn Drive Des Plaines, 60016 Cook County Personal Residence As of the date you file, the claim is: Check apply.  Contingent |                |                     |              |        |
| Number, Street, City, St   | ate & Zip Code                               | ☐ Unliquidated ☐ Disputed   |                |                     |              |        |
| Who owes the debt? Ch  | neck one.                                    | Nature of lien. Check all that apply.   |                |                     |              |        |
| Debtor 1 only  |  | ☐ An agreement you made (such as mortg car loan)  | age or secured | 1                   |              |        |
| ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 o ☐ At least one of the debtor | •  | ☐ Statutory lien (such as tax lien, mechanic☐ Judgment lien from a lawsuit  | c's lien)      |                     |              |        |
| Check if this claim relacement debt                                    |  | •   | cond Morto     | gage                |              |        |
| Date debt was incurred   | Opened<br>8/01/05<br>Last Active<br>1/20/15  | Last 4 digits of account number   | 1683           |                     |              |        |
|  |  |   |                |                     |              |        |
| Add the dellar value of  | vour ontrice in C                            | olumn A on this page. Write that number he  | oro:           | \$217,257.          | 00           |        |
|  |  |   |                |                     |              |        |

Write that number here:

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

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| Debtor 1        | 1 Xenofon Petridis  |             |           | Case number (if know)  |     |
|-----------------|---|-------------|-----------|--|-----|
|                 | First Name  | Middle Name | Last Name |  |     |
| Debtor 2        | Stauriani Petrid  | is          |           |  |     |
|                 | First Name  | Middle Name | Last Name |  |     |
| Hig<br>Mi<br>20 | ame Address<br>ggins Law Office<br>chael Brancheau<br>0 West Adams St<br>nicago, IL 60606-5 | reet #2220  |           | On which line in Part 1 did you enter the creditor?  Last 4 digits of account number | 2.2 |

Case 16-02394 Doc 1 Filed 01/27/16 Entered 01/27/16 10:05:36 Desc Main Document Page 21 of 54 Fill in this information to identify your case: Debtor 1 **Xenofon Petridis** Middle Name Last Name First Name Debtor 2 Stauriani Petridis (Spouse if, filing) First Name Middle Name Last Name NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: Case number (if known) ☐ Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. ☐ Yes. Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Total claim 4.1 \$3,341.16 **Barclays Bank Delaware** 3302 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Opened 2/01/13 Last Active P.O. Box 8801 When was the debt incurred? 6/06/14 Wilmington, DE 19899 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated ■ Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset?

■ No

☐ Yes

report as priority claims

■ Other. Specify Credit Card

Debts to pension or profit-sharing plans, and other similar debts

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|     | 1 Xenofon Petridis<br>2 Stauriani Petridis  |  | Case number (if know)                        |            |
|-----|---|--|--|------------|
| 4.2 | Citibank Sd, Na Nonpriority Creditor's Name   | Last 4 digits of account number                              | 7429   | \$3,945.00 |
|     | Attn: Centralized Bankruptcy Po Box 20363 Kansas City, MO 64195                             | When was the debt incurred?                                  | Opened 4/01/14 Last Active 1/16/15           |            |
|     | Number Street City State Zlp Code   | As of the date you file, the claim i                         | s: Check all that apply                      |            |
|     | Who incurred the debt? Check one.   | ☐ Contingent   |  |            |
|     | ■ Debtor 1 only   | ☐ Unliquidated   |  |            |
|     | Debtor 2 only   | Disputed   |  |            |
|     | ☐ Debtor 1 and Debtor 2 only  | Type of NONPRIORITY unsecured                                | d claim:                                     |            |
|     | At least one of the debtors and another   | ☐ Student loans  |  |            |
|     | ☐ Check if this claim is for a community debt Is the claim subject to offset?               | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not |            |
|     | ■ No  | ☐ Debts to pension or profit-sharin                          | g plans, and other similar debts             |            |
|     | ☐ Yes   | ■ Other Specify Credit Card                                  | <u> </u>                                     |            |
| 4.3 | Fifth Third Bank  | Last 4 digits of account number                              | 6483   | \$1,431.77 |
|     | Nonpriority Creditor's Name Fifth Third Bank Bankruptcy Department, 1830 East Paris Ave. Se | When was the debt incurred?                                  | Opened 9/01/10 Last Active 11/08/13          |            |
|     | Grand Rapids, MI 49546  Number Street City State Zlp Code                                   | As of the data you file the claims                           | Charle all that apply                        |            |
|     | Who incurred the debt? Check one.   | As of the date you file, the claim i                         | s: Спеск ан that арргу                       |            |
|     | Debtor 1 only   | ☐ Contingent   |  |            |
|     | ■ Debtor 2 only   | ☐ Unliquidated   |  |            |
|     | _   | ☐ Disputed   |  |            |
|     | Debtor 1 and Debtor 2 only  | Type of NONPRIORITY unsecured                                | d claim:                                     |            |
|     | At least one of the debtors and another   | ☐ Student loans  |  |            |
|     | ☐ Check if this claim is for a community debt Is the claim subject to offset?               | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not |            |
|     | No  | Debts to pension or profit-sharing                           | g plans, and other similar debts             |            |
|     | Yes   | ■ Other. Specify Credit Card                                 | <u> </u>                                     |            |
| 4.4 | Illinois Collection Service/ICS Nonpriority Creditor's Name                                 | Last 4 digits of account number                              | 2462   | \$1,001.00 |
|     | Illinois Collection Service<br>Po Box 1010  | When was the debt incurred?                                  | Opened 7/01/10 Last Active 1/24/11           |            |
|     | Tinley Park, IL 60477  Number Street City State Zlp Code                                    | As of the date you file, the claim i                         | s: Check all that apply                      |            |
|     | Who incurred the debt? Check one.   | _  |  |            |
|     | ☐ Debtor 1 only   | ☐ Contingent   |  |            |
|     | ■ Debtor 2 only   | Unliquidated   |  |            |
|     | Debtor 1 and Debtor 2 only  | Disputed   | l alaim.                                     |            |
|     | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured                                | ı cıaım:                                     |            |
|     | ☐ Check if this claim is for a community debt   | Student loans  |  |            |
|     | Is the claim subject to offset?   | Obligations arising out of a separeport as priority claims   | ration agreement or divorce that you did not |            |
|     | ■ No  | Debts to pension or profit-sharin                            | g plans, and other similar debts             |            |
|     |   |  | Attorney Advocate Good                       |            |
|     | Yes   | Other. Specify Samaritan                                     |  |            |

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| Debto | or 2 Stauriani Petridis   |   | Case number (if know)                           |             |  |  |  |  |
|-------|---|---|---|-------------|--|--|--|--|
| 4.5   | Med Business Bureau Nonpriority Creditor's Name                               | Last 4 digits of account number   | 0685  | \$128.00    |  |  |  |  |
|       | Po Box 1219   | When was the debt incurred?   | Opened 7/01/11                                  |             |  |  |  |  |
|       | Park Ridge, IL 60068  Number Street City State Zlp Code                       | As of the date you file, the clain  | is: Check all that apply                        |             |  |  |  |  |
|       | Who incurred the debt? Check one.   | ☐ Contingent  |   |             |  |  |  |  |
|       | ☐ Debtor 1 only   | ☐ Unliquidated  |   |             |  |  |  |  |
|       | ■ Debtor 2 only   | ☐ Disputed  |   |             |  |  |  |  |
|       | ☐ Debtor 1 and Debtor 2 only  | Type of NONPRIORITY unsecui   | ed claim:                                       |             |  |  |  |  |
|       | ☐ At least one of the debtors and another                                     | ☐ Student loans   |   |             |  |  |  |  |
|       | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a se report as priority claims                     | paration agreement or divorce that you did not  |             |  |  |  |  |
|       | ■ No  | Debts to pension or profit-sha  | ring plans, and other similar debts             |             |  |  |  |  |
|       | ☐ Yes   |   | n Attorney Med1 02<br>iologists Ltd             |             |  |  |  |  |
| 1.6   | National Bank Of Az Nonpriority Creditor's Name                               | Last 4 digits of account number   |   | \$19,000.00 |  |  |  |  |
|       | 6001 N 24th St<br>Phoenix, AZ 85016   | When was the debt incurred?   | Opened 7/01/07                                  |             |  |  |  |  |
|       | Number Street City State Zlp Code   | As of the date you file, the claim  | is: Check all that apply                        |             |  |  |  |  |
|       | Who incurred the debt? Check one.   | ☐ Contingent  |   |             |  |  |  |  |
|       | ■ Debtor 1 only   | ☐ Unliquidated  |   |             |  |  |  |  |
|       | ☐ Debtor 2 only   | ☐ Disputed  |   |             |  |  |  |  |
|       | Debtor 1 and Debtor 2 only  | Type of NONPRIORITY unsecur   | ed claim:                                       |             |  |  |  |  |
|       | At least one of the debtors and another                                       | ☐ Student loans   |   |             |  |  |  |  |
|       | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a se report as priority claims                     | paration agreement or divorce that you did not  |             |  |  |  |  |
|       | ■ No  | Debts to pension or profit-sha  | ring plans, and other similar debts             |             |  |  |  |  |
|       | ☐ Yes   | Other. Specify  Real Esta foreclosure   | te Specific. Deficiency from re 2008 in Arizona |             |  |  |  |  |
| 1.7   | Us Bank   | Last 4 digits of account number   | 3290  | \$360.00    |  |  |  |  |
|       | Nonpriority Creditor's Name 4325 17th Ave S Fargo, ND 58125                   | When was the debt incurred?   | Opened 10/01/13 Last Active 1/09/15             |             |  |  |  |  |
|       | Number Street City State Zlp Code   | As of the date you file, the clain  | is: Check all that apply                        |             |  |  |  |  |
|       | Who incurred the debt? Check one.   | ☐ Contingent  |   |             |  |  |  |  |
|       | ☐ Debtor 1 only   | ☐ Unliquidated ☐ Disputed  Type of NONPRIORITY unsecured claim: ☐ Student loans |   |             |  |  |  |  |
|       | ☐ Debtor 2 only   |   |   |             |  |  |  |  |
|       | ■ Debtor 1 and Debtor 2 only  |   |   |             |  |  |  |  |
|       | $\square$ At least one of the debtors and another                             |   |   |             |  |  |  |  |
|       | ☐ Check if this claim is for a community debt Is the claim subject to offset? | Obligations arising out of a se report as priority claims                       | paration agreement or divorce that you did not  |             |  |  |  |  |
|       | ■ No  | Debts to pension or profit-sha  | ring plans, and other similar debts             |             |  |  |  |  |
|       | Yes   | ■ Other. Specify Credit Ca  | d   |             |  |  |  |  |

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| Debtor 2                     | Xenofon l Stauriani   |   |   | Case r                | number (if know)   |                           |
|------------------------------|---|---|---|-----------------------|--|---------------------------|
| 4.8                          | Us Bank   | Usania Niana  | Last 4 digits of account number   | 4204                  | <u> </u>   | \$1,923.00                |
|                              | Nonpriority Cred<br>4325 17th A<br>Fargo, ND 5                                | ve S  | When was the debt incurred?   | Opei<br>12/30         | ned 3/01/10 Last Active<br>0/14  |                           |
| _                            | Number Street ( Who incurred t Debtor 1 only Debtor 2 only Debtor 1 and       | City State Zlp Code he debt? Check one. y   | As of the date you file, the claim is  Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans                   |                       | all that apply   |                           |
|                              | _   | s claim is for a community debt   | ☐ Obligations arising out of a separ report as priority claims ☐ Debts to pension or profit-sharing ☐ Other. Specify ☐ Credit Card    | g plans, a            | ·  |                           |
| 4.9                          | Us Bank   |   | Last 4 digits of account number   | 4196                  | <b>i</b>   | \$1,536.00                |
|                              | Nonpriority Cred<br>4325 17th A<br>Fargo, ND 5                                | ve S  | When was the debt incurred?   | Oper<br>1/09/         | ned 3/01/10 Last Active  |                           |
| _                            | Number Street 0   | City State Zlp Code   | As of the date you file, the claim is   | : Check               | all that apply   |                           |
|                              | _   | he debt? Check one.   | ☐ Contingent  |                       |  |                           |
|                              | Debtor 1 only   | •   | ☐ Unliquidated  |                       |  |                           |
|                              | Debtor 2 only   | •   | ☐ Disputed  |                       |  |                           |
|                              | Debtor 1 and  | ·   | Type of NONPRIORITY unsecured   | claim:                |  |                           |
|                              |   | of the debtors and another s claim is for a community debt  | ☐ Student loans   |                       |  |                           |
|                              | Is the claim sul  |   | Obligations arising out of a separ  | J                     | ·  |                           |
|                              | No  |   | Debts to pension or profit-sharing  | g plans, a            | and other similar debts  |                           |
|                              | ☐ Yes   |   | Other. Specify Credit Card  | <u> </u>              |  |                           |
| trying t<br>more t<br>any de | s page only if ye<br>to collect from y<br>han one credito<br>bts in Parts 1 o | you for a debt you owe to someone<br>or for any of the debts that you liste<br>r 2, do not fill out or submit this pa | t your bankruptcy, for a debt that you<br>else, list the original creditor in Par<br>ed in Parts 1 or 2, list the additional c<br>ge. | ts 1 or 2<br>reditors | , then list the collection agency here<br>here. If you do not have additional p                        | e. Similarly, if you have |
| -NONE                        | d Address   | Line  | Pa  | art 1: Cr             | riginal creditor?<br>editors with Priority Unsecured Claims<br>editors with Nonpriority Unsecured Clai | ms                        |
|                              |   | Las   | st 4 digits of account number   |                       |  |                           |
|                              |   | nounts for Each Type of Unsecertain types of unsecured claims.  | cured Claim<br>This information is for statistical rep  | orting p              |  | ne amounts for each type  |
|                              | 6a.   | Domestic support obligations  |   | 6a.                   | Total claim \$ 0.00  |                           |
| Total cla                    |   | Tayon and cartain other debte ve  | avva tha mavammaant   | Ch                    |  | •                         |
| from Pa                      | art 1 6b.<br>6c.  | Taxes and certain other debts yo<br>Claims for death or personal inju   | <del>-</del>  | 6b.<br>6c.            | \$ <u>0.00</u><br>\$ 0.00  | -                         |
|                              | 6d.   | -   | red claims. Write that amount here.   | 6d.                   | \$ 0.00  | -                         |
|                              | 6e.   | Total. Add lines 6a through 6d.   |   | 6e.                   | \$0.00   |                           |
|                              | 6f.   | Student loans   |   | 6f.                   | Total Claim \$ 0.00  |                           |
| Total cla                    |   | Obligations arising out of a separate   | ration agreement or divorce that you  | 6g.                   | \$ 0.00  | •                         |

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Debtor 2 Xenofon Petridis
Stauriani Petridis
Case number (if know)

did not report as priority claims
6h. Debts to pension or profit-sharing plans, and other similar debts
6i. Other. Add all other nonpriority unsecured claims. Write that amount here.
6i. \$ 32,665.93

6j. Total. Add lines 6f through 6i.

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|                     |                          | Ducume            | III Paue 20 01 34 |                       |
|---------------------|--------------------------|-------------------|-------------------|-----------------------|
| Fill in this infor  | rmation to identify your | case:             |                   |                       |
| Debtor 1            | Xenofon Petridis         |                   |                   |                       |
|                     | First Name               | Middle Name       | Last Name         |                       |
| Debtor 2            | Stauriani Petridis       | <b>S</b>          |                   |                       |
| (Spouse if, filing) | First Name               | Middle Name       | Last Name         |                       |
| United States B     | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS       |                       |
| Case number         |                          |                   |                   | ☐ Check if this is an |
|                     |                          |                   |                   | amended filing        |

### Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

|     | Person or | company with Name, Number | whom you have the<br>, Street, City, State and ZIP | e contract or lease<br>Code           | State what the contract or lease is for |
|-----|-----------|---------------------------|--|---------------------------------------|---|
| 2.1 |           |                           |  |                                       |   |
|     | Name      |                           |  |                                       | <del>_</del>                            |
|     | Number    | Street                    |  |                                       |   |
|     | City      |                           | State  | ZIP Code                              | _                                       |
| 2.2 |           |                           |  |                                       | <u> </u>                                |
|     | Name      |                           |  |                                       |   |
|     | Number    | Street                    |  |                                       | _                                       |
|     | City      |                           | State  | ZIP Code                              | _                                       |
| 2.3 | -         |                           |  |                                       |   |
|     | Name      |                           |  |                                       |   |
|     | Number    | Street                    |  |                                       | _                                       |
|     | City      |                           | State  | ZIP Code                              | <u> </u>                                |
| 2.4 | <u> </u>  |                           |  |                                       |   |
|     | Name      |                           |  |                                       | _                                       |
|     | Number    | Street                    |  |                                       | _                                       |
|     | City      |                           | State  | ZIP Code                              | _                                       |
| 2.5 |           |                           |  |                                       |   |
|     | Name      |                           |  |                                       |   |
|     | Number    | Street                    |  |                                       | _                                       |
|     | City      |                           | State  | ZIP Code                              | _                                       |
|     |           |                           |  | · · · · · · · · · · · · · · · · · · · |   |

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|   |  | Document   | Page 27 of 5                                      | <u>54</u>   |
|---|--|--|---|---|
| Fill in this                            | information to identify your c                                       | ase:   |   |   |
| Debtor 1                                | Xenofon Petridis   |  |   |   |
| Dobtor 2                                | First Name   | Middle Name  | Last Name   |   |
| Debtor 2<br>(Spouse if, filir           | ng) Stauriani Petridis First Name                                    | Middle Name  | Last Name   |   |
| United Star                             | tes Bankruptcy Court for the:  | NORTHERN DISTRICT OF   | ILLINOIS  |   |
| Case numb                               | ber  |  |   |   |
| (if known)                              |  |  |   | ☐ Check if this is an amended filing  |
| Official                                | L Corm 106U  |  |   |   |
|   | l Form 106H<br>Iule H: Your Code                                     | htors  |   | 4045  |
| Scried                                  | ule n. Your Code   | פוטוטו א   |   | 12/15   |
| people are<br>ill it out, a<br>our name | filing together, both are equa                                       | Ily responsible for supplying<br>poxes on the left. Attach the<br>Answer every question. | ng correct information<br>e Additional Page to th | omplete and accurate as possible. If two married . If more space is needed, copy the Additional Page, nis page. On the top of any Additional Pages, write a codebtor. |
| _                                       | <b>,</b>   | ou and minig a joint dade, us .  | iot not ouner opouco do                           |   |
| ■ No                                    |  |  |   |   |
| ☐ Yes                                   | <b>3</b>   |  |   |   |
|   | hin the last 8 years, have you<br>a, California, Idaho, Louisiana, N |  |   | (Community property states and territories include on, and Wisconsin.)  |
|   | Go to line 3.  |  |   |   |
| ☐ Yes                                   | s. Did your spouse, former spous                                     | se, or legal equivalent live wi  | th you at the time?                               |   |
| in line<br>Form                         | 2 again as a codebtor only if  | that person is a guarantor   | or cosigner. Make sur                             | our spouse is filing with you. List the person shown<br>e you have listed the creditor on Schedule D (Officia<br>). Use Schedule D, Schedule E/F, or Schedule G to    |
|   | Column 1: Your codebtor<br>Name, Number, Street, City, State and ZIP | Code   |   | Column 2: The creditor to whom you owe the debt Check all schedules that apply:   |
| 3.1                                     |  |  |   | ☐ Schedule D, line  |
|   | Name   |  |   | Schedule E/F, line  |
|   |  |  |   | ☐ Schedule G, line  |
|   | Number Street  |  |   |   |
|   | City   | State  | ZIP Code  |   |
| 3.2                                     |  |  |   | ☐ Schedule D, line  |
|   | Name   |  |   | ☐ Schedule E/F, line  |
|   |  |  |   | ☐ Schedule G, line  |
| 7                                       | Number Street  |  |   |   |

ZIP Code

State

City

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|             |  |   |                            |                |       | •  |                               |                          |          |
|-------------|--|---|----------------------------|----------------|-------|--|-------------------------------|--------------------------|----------|
| Fill        | in this information to identify  | our case:   |                            |                |       |  |                               |                          |          |
| Del         | btor 1 Xenofo  | n Petridis  |                            |                |       |  |                               |                          |          |
|             | btor 2 Stauria   | ni Petridis                                       | _                          |                |       |  |                               |                          |          |
| Uni         | ited States Bankruptcy Court   | or the: NORTHERN D                                | ISTRICT OF ILLINOIS        |                |       |  |                               |                          |          |
|             | se number<br>nown)   |   |                            |                |       | Check if this is:  An amende  A supplement 13 income | ed filing<br>ent showir       | ng postpetition          |          |
| 0           | fficial Form 106l  |   |                            |                |       | MM / DD/ Y   | YYY                           |                          |          |
| S           | chedule I: Your  | ncome   |                            |                |       | ,,   |                               |                          | 12/15    |
| spo<br>atta | plying correct information. use. If you are separated an ch a separate sheet to this f | d your spouse is not fi<br>orm. On the top of any | ling with you, do not incl | lude info      | rmati | on about your sp                                     | ouse. If m                    | nore space is            | needed,  |
| 1.          | Fill in your employment information.   |   | Debtor 1                   | Debtor 1       |       | Debtor 2   | Debtor 2 or non-filing spouse |                          |          |
|             | If you have more than one j  | ob,<br>Employment st                              | ☐ Employed                 | ☐ Employed     |       |  | ■ Employed                    |                          |          |
|             | attach a separate page with information about additional                               | • •   | ■ Not employed             | ■ Not employed |       |  | ☐ Not employed                |                          |          |
|             | employers.   | Occupation  | retired                    | retired        |       |  | Factory Worker (current WC)   |                          |          |
|             | Include part-time, seasonal, self-employed work.                                       | Employer's nan                                    | ne                         |                |       | Federa   | Mogul                         |                          |          |
|             | Occupation may include stu<br>or homemaker, if it applies.                             | dent Employer's add                               | address                    |                |       | 7450 N McCormick Blvd<br>Skokie, IL 60076-8103       |                               |                          |          |
|             |  | How long empl                                     | oyed there?                |                |       |  | 2 years                       |                          |          |
| Par         | rt 2: Give Details Abou  | t Monthly Income                                  |                            |                |       |  |                               |                          |          |
| spou        | imate monthly income as of<br>use unless you are separated                             | -   | ,                          | ·              | •     |  | ·                             | •                        |          |
|             | ou or your non-filing spouse have space, attach a separate sh                          |   | oyer, combine the informat | ion for all    | emp   | oyers for that pers                                  | on on the                     | lines below. If          | you need |
|             |  |   |                            |                |       | For Debtor 1   |                               | ebtor 2 or<br>ing spouse |          |
| 2.          | List monthly gross wages deductions). If not paid mo                                   |   |                            | 2.             | \$    | 0.00   | \$                            | 0.00                     |          |
| 3.          | Estimate and list monthly  | overtime pay.                                     |                            | 3.             | +\$   | 0.00   | +\$                           | 0.00                     |          |
| 4.          | Calculate gross Income.  | Add line 2 + line 3.                              |                            | 4.             | \$    | 0.00   | \$                            | 0.00                     |          |

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**Xenofon Petridis** Debtor 1 Debtor 2 Stauriani Petridis Case number (if known) For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here 0.00 0.00 List all payroll deductions: Tax, Medicare, and Social Security deductions 5a. 0.00 0.00 Mandatory contributions for retirement plans 5b. 5b. 0.00 0.00 5c. Voluntary contributions for retirement plans 5c. 0.00 0.00 Required repayments of retirement fund loans 5d. 5d. 0.00 0.00 5e. Insurance 5e. 0.00 0.00 5f. Domestic support obligations 5f. 0.00 0.00 5g. **Union dues** 5g. 0.00 0.00 5h. Other deductions. Specify: 5h.+ 0.00 0.00 Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. 0.00 0.00 Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. 7. 0.00 0.00 List all other income regularly received: 8 Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total 0.00 monthly net income. 8a. \$ 0.00 Interest and dividends 8h \$ 0.00 8h 0.00 Family support payments that you, a non-filing spouse, or a dependent 8c. regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. 0.00 0.00 8d. **Unemployment compensation** 8d. \$ 0.00 0.00 **Social Security** \$ 8e. 8e. 361.00 0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8f. 0.00 Specify: 0.00 8g. 8g. Pension or retirement income \$ 0.00 \$ 0.00 Other monthly income. Specify: Worker's Comp 8h.+ \$ 0.00 \$ 2,322.66 Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. 361.00 2,322.66 10. Calculate monthly income. Add line 7 + line 9. 10. \$ 361.00 \$ 2.322.66 \$ 2.683.66 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 0.00 Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it 12. 2,683.66 \$ applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? No. Yes. Explain: Joint debtor has been employed but is currently on Worker's Comp at \$528.36 per week. Prior earnings were \$831.20 per week. Resolution to this injury not known. Currently no deductions are taken but if regular employment resumes, taxes, insurance etc. are deducted.

| Fill       | in this informa             | ation to identify y                  | our case:        |  |  |            |                     |  |  |  |  |
|------------|-----------------------------|--------------------------------------|------------------|--|--|------------|---------------------|--|--|--|--|
| Deb        | tor 1                       | Xenofon Pet                          | ridis            |  |  | Ch         | eck if this is:     |  |  |  |  |
|            |                             | 2                                    |                  |  |  |            | ☐ An amended filing |  |  |  |  |
|            | ouse, if filing)            | Stauriani Pe                         | tridis           |  |  |            |                     | owing postpetition chapter of the following date:        |  |  |  |
| (Opt       | ouse, ii iiiiig)            |                                      |                  |  |  |            |                     |  |  |  |  |
| Unit       | ed States Bank              | ruptcy Court for the:                | NORTH            | IERN DISTRICT OF ILLIN                       | OIS                                      |            | MM / DD / YYYY      |  |  |  |  |
|            | e number                    |                                      |                  |  |  |            |                     |  |  |  |  |
| (If k      | nown)                       |                                      |                  |  |  |            |                     |  |  |  |  |
| $\bigcirc$ | fficial Ec                  | orm 106J                             |                  |  |  |            |                     |  |  |  |  |
|            |                             |                                      | Evnor            | 1606   |  |            |                     | 40/45  |  |  |  |
|            |                             | J: Your                              |                  | I <b>ろじる</b><br>. If two married people ar   | re filing together. h                    | noth are e | gually responsible  | 12/15  |  |  |  |
| info       | ormation. If n              |                                      | eded, atta       | ch another sheet to this                     |  |            |                     |  |  |  |  |
| Par        |                             | ribe Your House                      | ehold            |  |  |            |                     |  |  |  |  |
| 1.         | Is this a joi               |                                      |                  |  |  |            |                     |  |  |  |  |
|            | ☐ No. Go to                 |                                      |                  |  |  |            |                     |  |  |  |  |
|            | ■ Yes. <b>Doe</b>           | es Debtor 2 live                     | in a separ       | ate household?                               |  |            |                     |  |  |  |  |
|            | ■ N                         |                                      | st file Offic    | ial Form 106J-2, <i>Expenses</i>             | s for Separate Hous                      | ehold of D | ebtor 2.            |  |  |  |  |
| 2.         | Do you hay                  | e dependents?                        | ■ No             |  |  |            |                     |  |  |  |  |
| ۷.         | •                           | •                                    | _                | E91 (41) ( 4) (                              | 5  |            | B to at             | David Land   |  |  |  |
|            | Do not list D<br>and Debtor |                                      | ☐ Yes.           | Fill out this information for each dependent | Dependent's relati<br>Debtor 1 or Debtor |            | Dependent's<br>age  | Does dependent live with you?                            |  |  |  |
|            | Do not state                | e the                                |                  |  |  |            |                     | □ No   |  |  |  |
|            | dependents                  |                                      |                  |  |  |            |                     | ☐ Yes  |  |  |  |
|            |                             |                                      |                  |  |  |            |                     | □ No   |  |  |  |
|            |                             |                                      |                  |  |  |            |                     | _  |  |  |  |
|            |                             |                                      |                  |  |  |            |                     | □ No   |  |  |  |
|            |                             |                                      |                  |  |  |            |                     | _ Yes  |  |  |  |
|            |                             |                                      |                  |  |  |            |                     | □ No   |  |  |  |
| 2          | De veur ev                  | nanasa inaluda                       |                  |  |  |            |                     | _ Pes  |  |  |  |
| 3.         | expenses of                 | penses include<br>of people other t  | han $_{\square}$ | No<br>Yes                                    |  |            |                     |  |  |  |  |
|            | yourself an                 | d your depende                       | nts?             | res  |  |            |                     |  |  |  |  |
| Par        |                             | nate Your Ongoi                      |                  |  |  |            |                     |  |  |  |  |
| exp        |                             | a date after the                     |                  |  |  |            |                     | chapter 13 case to report to of the form and fill in the |  |  |  |
|            |                             |                                      |                  | government assistance i                      |  |            |                     |  |  |  |  |
|            | ficial Form 1               |                                      |                  |  |  |            | Your ex             | penses   |  |  |  |
| 4.         |                             | or home owners<br>nd any rent for th |                  | ses for your residence. I<br>or lot.         | nclude first mortgag                     | је<br>4.   | \$                  | 1,100.69   |  |  |  |
|            | If not include              | ded in line 4:                       |                  |  |  |            |                     |  |  |  |  |
|            | 4a. Real                    | estate taxes                         |                  |  |  | 4a.        | \$                  | 0.00   |  |  |  |
|            | 4b. Prope                   | erty, homeowner's                    | s, or renter     | 's insurance                                 |  | 4b.        |                     | 0.00   |  |  |  |
|            |                             |                                      | •                | upkeep expenses                              |  | 4c.        | ·                   | 50.00  |  |  |  |
| _          |                             | eowner's associat                    |                  |  | and a manufacture to one                 | 4d.<br>5   | ·                   | 0.00<br>100.00   |  |  |  |
| 2          | AGGITIONALI                 | womaae navm                          | ents tor va      | our residence, such as ho                    | THE ECHIEV IDANS                         | <b>^</b>   |                     | 7 (10) (10)  |  |  |  |

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| btor 1 Xenofon Petridis btor 2 Stauriani Petridis   | Case num     | ber (if known) |           |
|---|--------------|----------------|-----------|
| Utilities:  |              |                |           |
| 6a. Electricity, heat, natural gas  | 6a.          | \$             | 150.00    |
| 6b. Water, sewer, garbage collection  | 6b.          | \$             | 100.00    |
| 6c. Telephone, cell phone, Internet, satellite, and cable services  | 6c.          | \$             | 294.00    |
| 6d. Other. Specify:   | 6d.          | \$             | 0.00      |
| Food and housekeeping supplies  | 7.           | \$             | 600.00    |
| Childcare and children's education costs  | 8.           | \$             | 0.00      |
| Clothing, laundry, and dry cleaning   | 9.           | \$             | 40.00     |
| Personal care products and services   | 10.          | \$             | 60.00     |
| Medical and dental expenses   | 11.          | \$             | 300.00    |
| <b>Transportation.</b> Include gas, maintenance, bus or train fare.   |              |                |           |
| Do not include car payments.  | 12.          | \$             | 300.00    |
| Entertainment, clubs, recreation, newspapers, magazines, and books  | 13.          | \$             | 60.00     |
| Charitable contributions and religious donations  | 14.          | \$             | 0.00      |
| Insurance.  |              |                |           |
| Do not include insurance deducted from your pay or included in lines 4 or 20.   |              | _              |           |
| 15a. Life insurance   | 15a.         |                | 0.00      |
| 15b. Health insurance   | 15b.         |                | 0.00      |
| 15c. Vehicle insurance  | 15c.         | \$             | 110.00    |
| 15d. Other insurance. Specify:  | 15d.         | \$             | 0.00      |
| <b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20.   |              |                |           |
| Specify: Medicare deduction from social security  | 16.          | \$             | 105.00    |
| Installment or lease payments:  |              |                |           |
| 17a. Car payments for Vehicle 1   | 17a.         | \$             | 324.87    |
| 17b. Car payments for Vehicle 2   | 17b.         | \$             | 0.00      |
| 17c. Other. Specify:  | 17c.         | \$             | 0.00      |
| 17d. Other. Specify:  | 17d.         | \$             | 0.00      |
| Your payments of alimony, maintenance, and support that you did not report a  |              | •              | 0.00      |
| deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I)  | . 18.        | ·              | 0.00      |
| Other payments you make to support others who do not live with you.   |              | \$             | 0.00      |
| Specify:  | 19.          |                |           |
| Other real property expenses not included in lines 4 or 5 of this form or on Sch  |              |                | 0.00      |
| 20a. Mortgages on other property  | 20a.         | ·              | 0.00      |
| 20b. Real estate taxes  | 20b.         |                | 0.00      |
| 20c. Property, homeowner's, or renter's insurance   | 20c.         | ·              | 0.00      |
| 20d. Maintenance, repair, and upkeep expenses   | 20d.         | ·              | 0.00      |
| 20e. Homeowner's association or condominium dues  | 20e.         | •              | 0.00      |
| Other: Specify:   | 21.          | +\$            | 0.00      |
| Calculate your monthly expenses   |              |                |           |
| 22a. Add lines 4 through 21.  |              | \$             | 3,694.56  |
| 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2  |              | \$             | 3,094.30  |
|   |              |                |           |
| 22c. Add line 22a and 22b. The result is your monthly expenses.   |              | \$             | 3,694.56  |
| Calculate your monthly net income.  |              |                |           |
| 23a. Copy line 12 (your combined monthly income) from Schedule I.   | 23a.         | \$             | 2,683.66  |
| 23b. Copy your monthly expenses from line 22c above.  | 23b.         |                | 3,694.56  |
|   | 200.         | <b>*</b>       | 3,037.30  |
| 23c. Subtract your monthly expenses from your monthly income.   |              |                |           |
| The result is your <i>monthly net income</i> .  | 23c.         | \$             | -1,010.90 |
| The result is your <i>monthly net income</i> .  Do you expect an increase or decrease in your expenses within the year after y For example, do you expect to finish paying for your car loan within the year or do you expect your modification to the terms of your mortgage?  No. | ou file this | s form?        | <u> </u>  |

☐ Yes.

Explain here: Debtor's currently in trial period for mortgage modification. That number used for this petition but will be determined in 90 days

| Debtor 1               | mation to identify you                           |                              |  |  |                                      |
|------------------------|--|------------------------------|--|--|--------------------------------------|
| Debior 1               | First Name                                       | Middle Name                  | Last Name  |  |                                      |
| Debtor 2               | Stauriani Petri                                  | dis                          |  |  |                                      |
| (Spouse if, filing)    | First Name                                       | Middle Name                  | Last Name  | <del></del>  |                                      |
| United States Ba       | ankruptcy Court for th                           | e: NORTHERN DISTRICT         | OF ILLINOIS  |  |                                      |
| Case number (if known) |  |                              |  |  | ☐ Check if this is an amended filing |
| Official Forr          | m 106Dec   |                              |  |  |                                      |
|                        |  | an Individual                | <b>Debtor's Sche</b>   | dules  | 12/15                                |
|                        |  |                              |  |  |                                      |
| If two married po      | eople are filing toge                            | ther, both are equally respo | nsible for supplying correct i                                 | information.   |                                      |
| obtaining mone         |  | d in connection with a bank  | s or amended schedules. Mak<br>kruptcy case can result in find |  |                                      |
| Sig                    | n Below  |                              |  |  |                                      |
| Did you pa             | y or agree to pay so                             | meone who is NOT an attor    | ney to help you fill out bankr                                 | uptcy forms?   |                                      |
| ■ No                   |  |                              |  |  |                                      |
| ☐ Yes. I               | Name of person                                   |                              |  | Bankruptcy Petition Pre<br>lature (Official Form 119 | parer's Notice, Declaration,<br>)).  |
|                        | alty of perjury, I declar<br>e true and correct. | are that I have read the sum | mary and schedules filed wit                                   | th this declaration and                              | ı                                    |
| X /s/ Xer              | nofon Petridis                                   |                              | X /s/ Stauriani Pe   | etridis  |                                      |
|                        | on Petridis                                      |                              | Stauriani Petric   |  |                                      |

Signature of Debtor 2

Date **January 25, 2016** 

Signature of Debtor 1

Date **January 25, 2016** 

| Fill i           | n this inform  | nation to identify you  | r case:  |   |  |   |  |  |  |  |
|------------------|--|---|--|---|--|---|--|--|--|--|
| Debt             |  | Xenofon Petridis  |  |   |  |   |  |  |  |  |
|                  |  | First Name  | Middle Name  | Last Name   |  |   |  |  |  |  |
| Debt             |  | Stauriani Petridi   |  | LastName  |  |   |  |  |  |  |
| (Spous           | se if, filing)   | First Name  | Middle Name  | Last Name   |  |   |  |  |  |  |
| Unite            | d States Bar   | kruptcy Court for the:  | NORTHERN DISTRICT C  | OF ILLINOIS   |  |   |  |  |  |  |
| Case<br>(if know | number   |   |  |   |  | theck if this is an mended filing                     |  |  |  |  |
|                  |  |   |  |   | a  | mended ming   |  |  |  |  |
| Offi             | cial For   | m 107   |  |   |  |   |  |  |  |  |
|                  |  |   | Affairs for Individ  | luals Filing for B                                    | ankruptcy  | 12/1  |  |  |  |  |
| inforr           | nation. If meer (if known  | ore space is needed,<br>). Answer every que                                     | attach a separate sheet to   | this form. On the top of an                           | e equally responsible for sup<br>ny additional pages, write yo   |   |  |  |  |  |
|                  |  | current marital statu   |  | 2.100 201010  |  |   |  |  |  |  |
| ]<br>[           | ■ Married □ Not marr   | ied   |  |   |  |   |  |  |  |  |
| 2. [             | Ouring the la  | During the last 3 years, have you lived anywhere other than where you live now? |  |   |  |   |  |  |  |  |
| ]<br>[           | <ul><li>No</li><li>Yes. List all of the places you lived in the last 3 years. Do not include where you live now.</li></ul> |   |  |   |  |   |  |  |  |  |
|                  | Debtor 1 Pri   | or Address:   | Dates Debtor 1 lived there   | Debtor 2 Prior Ac                                     | ldress:  | Dates Debtor 2<br>lived there                         |  |  |  |  |
|                  |  |   |  |   | nity property state or territor<br>lico, Texas, Washington and V |   |  |  |  |  |
| <b>I</b>         | ■ No<br>□ Yes. Ma  | ke sure you fill out <i>Sci</i>   | hedule H: Your Codebtors (O  | fficial Form 106H).                                   |  |   |  |  |  |  |
| Part             | 2 Explain  | n the Sources of You  | ır Income  |   |  |   |  |  |  |  |
| F                | ill in the tota  | I amount of income yo   | nployment or from operating traceived from all jobs and a have income that you receive | all businesses, including par                         |  | ndar years?   |  |  |  |  |
| [                | □ No   |   |  |   |  |   |  |  |  |  |
| •                | Yes. Fill  | in the details.   |  |   |  |   |  |  |  |  |
|                  |  |   | Debtor 1   |   | Debtor 2   |   |  |  |  |  |
|                  |  |   | Sources of income<br>Check all that apply.   | Gross income<br>(before deductions and<br>exclusions) | Sources of income<br>Check all that apply.                       | Gross income<br>(before deductions<br>and exclusions) |  |  |  |  |
|                  |  | of current year until<br>I for bankruptcy:                                      | ☐ Wages, commissions, bonuses, tips  | \$0.00  | ■ Wages, commissions, bonuses, tips                              | \$1,586.58  |  |  |  |  |
|                  |  |   | ☐ Operating a business   |   | ☐ Operating a business   |   |  |  |  |  |

Official Form 107

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Debtor 1 Xenofon Petridis Debtor 2 Stauriani Petridis Case number (if known) Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$36,332.79 ☐ Wages, commissions, \$0.00 Wages, commissions, (January 1 to December 31, 2015) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$0.00 \$37,452,00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2014) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** (before deductions and Describe below. (before deductions Describe below... exclusions) and exclusions) From January 1 of current year until (H) Social Security \$360.00 the date you filed for bankruptcy: Worker's Comp \$1,586.58 \$0.00 For last calendar year: (H) Social Security \$4,320.00 (January 1 to December 31, 2015) \$0.00 Worker's Comp \$5,288.00 For the calendar year before that: (H) Social Security \$4,260,00 (January 1 to December 31, 2014) \$0.00 Worker's Comp Unknown Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose.' During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,225\* or more? □ No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$6,225\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.

Case 16-02394 Doc 1 Filed 01/27/16 Entered 01/27/16 10:05:36 Desc Main Page 35 of 54 Document Debtor 1 Xenofon Petridis Debtor 2 Stauriani Petridis Case number (if known) Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? □ No. Go to line 7. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address **Dates of payment** Total amount Amount you Was this payment for ... still owe paid **Ocwen Loan Servicing** 1,100.69 January \$1,100.69 \$162,062.00 ■ Mortgage PO Box 24738 24 on new trial ☐ Car West Palm Beach, FL 33416-4738 mortgage ☐ Credit Card modification. ☐ Loan Repayment ☐ Suppliers or vendors □ Other **Huntington Natl Bk** \$324 monthly on \$972.00 \$8,226.00 ■ Mortgage **Bankruptcy Notice** auto loan □ Car Po Box 89424 ☐ Credit Card Cleveland, OH 44101 ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Yes. List all payments to an insider **Insider's Name and Address Dates of payment** Total amount Amount you Reason for this payment paid still owe Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider **Insider's Name and Address Dates of payment Total amount** Amount you Reason for this payment still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Status of the case Case title Nature of the case Court or agency Case number MB Financial Bank NA vs Xenofon Civil tort **Circuit Court of Cook** Pending

**Petridis** 

15 L 5711

County - Chancery

Chicago, IL 60602

50 W Washington #802

□ On appeal

□ Concluded

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|     | otor 1 <b>Xenofon Petridis</b> otor 2 <b>Stauriani Petridis</b>   | <b>s</b>            | go or  | Case number (if known)              |                          |  |  |  |  |  |
|-----|---|---------------------|--|-------------------------------------|--------------------------|--|--|--|--|--|
| 10. | Within 1 year before you f Check all that apply and fill  No  |                     | r, was any of your property repossessed  | d, foreclosed, garnished, attach    | ned, seized, or levied?  |  |  |  |  |  |
|     | ☐ Yes. Fill in the informa  | tion below.         |  |                                     |                          |  |  |  |  |  |
|     | Creditor Name and Addre   |                     | Describe the Property  | Date                                | Value of the<br>property |  |  |  |  |  |
|     |   |                     | Explain what happened  |                                     |                          |  |  |  |  |  |
| 11. | Within 90 days before you accounts or refuse to make No  ☐ Yes. Fill in the details.  |                     | cy, did any creditor, including a bank o<br>use you owed a debt?   | r financial institution, set off an | y amounts from your      |  |  |  |  |  |
|     | Creditor Name and Addre   | 9SS                 | Describe the action the creditor took  | Date action was taken               | Amount                   |  |  |  |  |  |
| 12. | Within 1 year before you f court-appointed receiver,  ■ No □ Yes  |                     | r, was any of your property in the posse other official?   | ession of an assignee for the be    | enefit of creditors, a   |  |  |  |  |  |
| Par | rt 5: List Certain Gifts an   | d Contributions     |  |                                     |                          |  |  |  |  |  |
| 13. | Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  No  Yes. Fill in the details for each gift. |                     |  |                                     |                          |  |  |  |  |  |
|     | Gifts with a total value of per person  Person to Whom You Ga   | ·                   | Describe the gifts   | Dates you gave the gifts            | Value                    |  |  |  |  |  |
|     | Address:  |                     |  |                                     |                          |  |  |  |  |  |
| 14. | Within 2 years before you  ■ No □ Yes. Fill in the details f  |                     | ey, did you give any gifts or contribution ibution.  | ns with a total value of more tha   | an \$600 to any charity  |  |  |  |  |  |
|     | Gifts or contributions to<br>more than \$600<br>Charity's Name<br>Address (Number, Street, City,  |                     | Describe what you contributed  | Dates you contributed               | Value                    |  |  |  |  |  |
| Par | rt 6: List Certain Losses   |                     |  |                                     |                          |  |  |  |  |  |
| 15. | Within 1 year before you f disaster, or gambling?   | iled for bankruptcy | or since you filed for bankruptcy, did y   | you lose anything because of th     | neft, fire, other        |  |  |  |  |  |
|     | Yes. Fill in the details.   |                     |  |                                     |                          |  |  |  |  |  |
|     | Describe the property you how the loss occurred   | Incl                | scribe any insurance coverage for the loude the amount that insurance has paid. It ding insurance claims on line 33 of School perfy. | _ist loss                           | Value of property lost   |  |  |  |  |  |

Case 16-02394 Doc 1 Filed 01/27/16 Entered 01/27/16 10:05:36 Desc Main Document Page 37 of 54 Debtor 1 Xenofon Petridis Debtor 2 Stauriani Petridis Case number (if known) Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes. Fill in the details. Person Who Was Paid Description and value of any property Amount of Date payment Address transferred or transfer was payment Email or website address made Person Who Made the Payment, if Not You \$1,815.00 plus \$335 filing fee **Newland & Newland LLP** 1/26/2016 \$2,150.00 121 S. Wilke Ste #301 Arlington Heights, IL 60005 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of transferred Address or transfer was payment made Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. Nο П Yes. Fill in the details. **Person Who Received Transfer** Description and value of Describe any property or Date transfer was Address property transferred payments received or debts made paid in exchange Person's relationship to you

Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a

Description and value of the property transferred

Nο

Name of trust

Yes. Fill in the details.

beneficiary? (These are often called asset-protection devices.)

**Date Transfer was** 

made

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|                | otor 1<br>otor 2   | Xenofon Petridis<br>Stauriani Petridis  | Document   | raye so u  |             | mber (if known)   |   |
|----------------|--|---|--|--|-------------|---|---|
| Por            | 4 0.   | List of Certain Financial Accounts,   | Instruments Safe Dans                            | ocit Payos, and S  | torogo Un   | ito   |   |
| <b>Par</b> 20. | Withi sold, Included house   | n 1 year before you filed for bankrup<br>moved, or transferred?<br>de checking, savings, money marke<br>es, pension funds, cooperatives, as<br>No | otcy, were any financial                         | accounts or inst   | ruments h   | neld in your name, or for                                     | • • •   |
|                | Nam  | Yes. Fill in the details. se of Financial Institution and ress (Number, Street, City, State and ZIP   | Last 4 digits of account number                  | Type of account or instrument  |             | Date account was<br>closed, sold,<br>moved, or<br>transferred | Last balance<br>before closing or<br>transfer |
|                | 9339   | 3ank<br>9 Waukegan Road<br>ton Grove, IL 60053  | XXXX-6936  | ☐ Checking ■ Savings ☐ Money Ma ☐ Brokerage ☐ Other                            |             | nov 28, 2015  | \$10.80                                       |
|                | 9339   | Bank<br>9 Waukegan Road<br>ton Grove, IL 60053  | XXXX-0558  | ■ Checking □ Savings □ Money Ma □ Brokerage □ Other                            |             | Nov 28, 2015  | \$6.18  |
|                | 9339   | Bank<br>9 Waukegan Road<br>ton Grove, IL 60053  | XXXX-2470  | ■ Checking □ Savings □ Money Ma □ Brokerage □ Other                            |             | Nov 28, 2015  | \$10.37                                       |
| 21.            | cash,  | ou now have, or did you have within<br>, or other valuables?<br>No<br>Yes. Fill in the details.   | 1 year before you filed                          | for bankruptcy, a  | any safe d  | eposit box or other depo                                      | ository for securities,                       |
|                | Name of Financial Institution Address (Number, Street, City, State and ZIP Code)                             |   | Address (Number                                  | Who else had access to it?  Address (Number, Street, City, State and ZIP Code) |             | e the contents  | Do you still have it?                         |
| 22.            | <b>=</b> 1   | you stored property in a storage un<br>No<br>Yes. Fill in the details.  | it or place other than yo                        | our home within  | 1 year befo | ore you filed for bankru                                      | ptcy  |
|                | Address (Number, Street, City, State and ZIP Code) to it? Address (Number, Street, City, State and ZIP Code) |   |  | ber, Street, City,   |             | e the contents  | Do you still have it?                         |
| Par            | t 9:   | Identify Property You Hold or Contr   | rol for Someone Else                             |  |             |   |   |
| 23.            | for so   | ou hold or control any property that omeone.  No Yes. Fill in the details.  | someone else owns? In                            | nclude any prope   | rty you bo  | rrowed from, are storing                                      | g for, or hold in trust                       |
|                | Own  | Yes. Fill In the details.<br>ner's Name<br>ress (Number, Street, City, State and ZIP Code)  | Where is the pi<br>(Number, Street, Cit<br>Code) |  | Describe    | e the property  | Value   |

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Debtor 1 **Xenofon Petridis**Debtor 2 **Stauriani Petridis** 

Case number (if known)

|  | Part 10: | <b>Give Details</b> | About | <b>Environmental</b> | Informatio |
|--|----------|---------------------|-------|----------------------|------------|
|--|----------|---------------------|-------|----------------------|------------|

| For the pur | rpose of Par | t 10. the | following | definitions | apply: |
|-------------|--------------|-----------|-----------|-------------|--------|
|             |              |           |           |             |        |

| 101 | the purpose of rare to, the following definitions   | арріу.  |  |                      |
|-----|---|---|--|----------------------|
|     | Environmental law means any federal, state, or toxic substances, wastes, or material into the ai regulations controlling the cleanup of these substances. | ir, land, soil, surface water, groun                                      | •                                      |                      |
|     | Site means any location, facility, or property as to own, operate, or utilize it, including disposal  | -   | law, whether you now own, operate,     | or utilize it or use |
|     | Hazardous material means anything an environment hazardous material, pollutant, contaminant, or s   |   | s waste, hazardous substance, toxic    | substance,           |
| Rep | ort all notices, releases, and proceedings that yo  | ou know about, regardless of whe  | n they occurred.                       |                      |
| 24. | Has any governmental unit notified you that you   | ı may be liable or potentially liable                                     | e under or in violation of an environn | nental law?          |
|     | ■ No □ Yes. Fill in the details.  |   |  |                      |
|     | Name of site<br>Address (Number, Street, City, State and ZIP Code)  | Governmental unit<br>Address (Number, Street, City, State an<br>ZIP Code) | Environmental law, if you know it      | Date of notice       |
| 25. | Have you notified any governmental unit of any  | release of hazardous material?  |  |                      |
|     | ■ No □ Yes. Fill in the details.  |   |  |                      |
|     | Name of site<br>Address (Number, Street, City, State and ZIP Code)  | Governmental unit Address (Number, Street, City, State an ZIP Code)       | Environmental law, if you know it      | Date of notice       |
| 26. | Have you been a party in any judicial or adminis  | strative proceeding under any env   | rironmental law? Include settlements   | and orders.          |
|     | ■ No □ Yes. Fill in the details.  |   |  |                      |
|     | Case Title Case Number  | Court or agency Name Address (Number, Street, City, State and ZIP Code)   | Nature of the case                     | Status of the case   |
|     |   |   |  |                      |

#### Part 11: Give Details About Your Business or Connections to Any Business

| 27. Within 4 years before you filed for bankru                                   | ptcy, did you own a business or have any o  | f the following connections to any business?                                  |  |  |
|--|---|---|--|--|
| ☐ A sole proprietor or self-employed   | ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time |   |  |  |
| ☐ A member of a limited liability con  | ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)                        |   |  |  |
| ☐ A partner in a partnership   | ☐ A partner in a partnership  |   |  |  |
| ☐ An officer, director, or managing executive of a corporation                   |   |   |  |  |
| ☐ An owner of at least 5% of the voti  | ☐ An owner of at least 5% of the voting or equity securities of a corporation                                 |   |  |  |
| No. None of the above applies. Go to   | No. None of the above applies. Go to Part 12.   |   |  |  |
| Yes. Check all that apply above and fill in the details below for each business. |   |   |  |  |
| Business Name Address (Number, Street, City, State and ZIP Code)                 | Describe the nature of the business   | Employer Identification number Do not include Social Security number or ITIN. |  |  |

Dates business existed

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Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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| Fill in this information to identify your case: |                          |                   |             |                                     |   |
|---|--------------------------|-------------------|-------------|-------------------------------------|---|
| Debtor 1  | Xenofon Petridis         |                   |             |                                     |   |
|   | First Name               | Middle Name       | Last Name   |                                     |   |
| Debtor 2  | Stauriani Petridis       |                   |             |                                     |   |
| (Spouse if, filing)                             | First Name               | Middle Name       | Last Name   |                                     |   |
| United States Ba                                | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS |                                     |   |
| Case number (if known)                          |                          |                   |             | ☐ Check if this is a amended filing | n |

## Official Form 108

# Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

| Part 1: | List Your | Creditors | Who Have | Secured | Claims |
|---------|-----------|-----------|----------|---------|--------|
|---------|-----------|-----------|----------|---------|--------|

| For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. |  |   |  |  |
|---|--|---|--|--|
| Identify the creditor and the property that is collateral   | What do you intend to do with the property that secures a debt?    | Did you claim the property as exempt on Schedule C? |  |  |
|   |  |   |  |  |
| Creditor's Huntington Natl Bk   | ☐ Surrender the property.  | □ No  |  |  |
| name:   | ☐ Retain the property and redeem it.                               |   |  |  |
| Description of 2007 Toyota 4Runner  | Retain the property and enter into a<br>Reaffirmation Agreement.   | Yes   |  |  |
| property  | ☐ Retain the property and [explain]:                               |   |  |  |
| securing debt:  |  |   |  |  |
| Creditor's Ocwen Loan Servicing   | ☐ Surrender the property.  | □ No  |  |  |
| name:   | ☐ Retain the property and redeem it.                               |   |  |  |
| Description of Single Family Personal   | ☐ Retain the property and enter into a<br>Reaffirmation Agreement. | ■ Yes   |  |  |
| property Residence at 915 Modelyn securing debt. Drive, Des Plaines, IL 60016   | Retain the property and [explain]:                                 |   |  |  |

#### Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

modification.

Retain and pay as agreed. In trial

#### Describe your unexpired personal property leases

Will the lease be assumed?

Official Form 108

securing debt:

Statement of Intention for Individuals Filing Under Chapter 7

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|---|---|
| Lessor's name: Description of leased  | □ No  |
| Property:   | ☐ Yes   |
| Lessor's name: Description of leased  | □ No  |
| Property:   | ☐ Yes   |
| Lessor's name: Description of leased  | □ No  |
| Property:   | ☐ Yes   |
| Lessor's name:<br>Description of leased   | □ No  |
| Property:   | ☐ Yes   |
| Lessor's name: Description of leased  | □ No  |
| Property:   | ☐ Yes   |
| Lessor's name:<br>Description of leased   | □ No  |
| Property:   | ☐ Yes   |
| Lessor's name:<br>Description of leased   | □ No  |
| Property:   | ☐ Yes   |
| Part 3: Sign Below  |   |
| Under penalty of perjury, I declare that I have indicated property that is subject to an unexpired lease. | d my intention about any property of my estate that secures a debt and any personal |
| X /s/ Xenofon Petridis  | X /s/ Stauriani Petridis  |
| Xenofon Petridis Signature of Debtor 1  | Stauriani Petridis Signature of Debtor 2  |
| Date <b>January 25, 2016</b>  | Date <b>January 25, 2016</b>  |
|   |   |

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

# The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation        |
|------------|--------------------|
| \$245      | filing fee         |
| \$75       | administrative fee |
| + \$15     | trustee surcharge  |
| \$335      | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-02394 Doc 1 Filed 01/27/16 Entered 01/27/16 10:05:36 Desc Main Document Page 47 of 54

B2030 (Form 2030) (12/15)

# United States Bankruptcy Court Northern District of Illinois

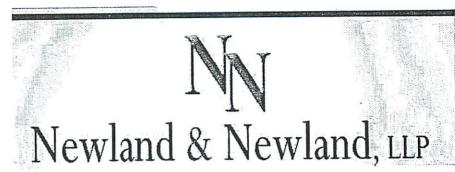
| In r | Xenofon Petridis  Stauriani Petridis   |                                      | Case No.                |                         |              |  |  |
|------|--|--------------------------------------|-------------------------|-------------------------|--------------|--|--|
| 1    | Granitalii i Guidio  | Debtor(s)                            | Chapter                 | 7                       |              |  |  |
|      |  |                                      |                         |                         |              |  |  |
|      | DISCLOSURE OF COMPENSA   | ATION OF ATTO                        | RNEY FOR DE             | EBTOR(S)                |              |  |  |
| 1.   | Pursuant to 11 U .S.C. § 329(a) and Fed. Bankr. P. 2016(b), compensation paid to me within one year before the filing of be rendered on behalf of the debtor(s) in contemplation of or   | the petition in bankruptc            | y, or agreed to be paid | to me, for services re- |              |  |  |
|      | For legal services, I have agreed to accept  |                                      | \$                      | 1,815.00                |              |  |  |
|      | Prior to the filing of this statement I have received  |                                      |                         | 1,815.00                |              |  |  |
|      | Balance Due  |                                      |                         | 0.00                    |              |  |  |
| 2.   | \$_335.00 of the filing fee has been paid.   |                                      |                         |                         |              |  |  |
| 3.   | The source of the compensation paid to me was:   |                                      |                         |                         |              |  |  |
|      | ■ Debtor □ Other (specify):  |                                      |                         |                         |              |  |  |
| 4.   | The source of compensation to be paid to me is:  |                                      |                         |                         |              |  |  |
| ٦.   |  |                                      |                         |                         |              |  |  |
|      | ■ Debtor □ Other (specify):  |                                      |                         |                         |              |  |  |
| 5.   | ■ I have not agreed to share the above-disclosed compensation  | ation with any other perso           | n unless they are mem   | bers and associates of  | my law firm. |  |  |
|      | ☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.   |                                      |                         |                         |              |  |  |
| 6.   | In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:  |                                      |                         |                         |              |  |  |
|      | <ul> <li>a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;</li> <li>b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;</li> <li>c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;</li> <li>d. [Other provisions as needed]</li> <li>Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.</li> </ul> |                                      |                         |                         |              |  |  |
| 7.   | By agreement with the debtor(s), the above-disclosed fee door Representation of the debtors in any discharge any other adversary proceeding.   |                                      |                         | es, relief from stay    | actions or   |  |  |
|      | C  | ERTIFICATION                         |                         |                         |              |  |  |
| this | I certify that the foregoing is a complete statement of any agriculture proceeding.  | reement or arrangement fo            | or payment to me for re | epresentation of the de | btor(s) in   |  |  |
|      | January 25, 2016   | /s/ Stephen S. N                     | lewland                 |                         |              |  |  |
| _    | Date   | Stephen S. Newland 6207458           |                         |                         |              |  |  |
|      |  | Signature of Attori<br>Newland & New |                         |                         |              |  |  |
|      |  | 1512 Artaius Pa                      |                         |                         |              |  |  |
|      |  | Libertyville, IL 6                   | 0048                    |                         |              |  |  |
|      |  |                                      | Fax: (847) 549-190      | 2                       |              |  |  |
|      |  | steve@newland                        | llaw.com                |                         |              |  |  |
|      |  | Name of law firm                     |                         |                         |              |  |  |

#### Main Offices:

Libertyville Office: 1512 Artaius Parkway, Suite 300 Libertyville, Illinois 60048 Office: 847.549.0000 Fax: 847.549.1902

Arlington Heights Office: 121 S Wilke Road, Suite 301 Arlington Heights, Illinois 60005 Office: 847.797.8001

Fax: 847.797.8001



Arlington Heights = Libertyville = Crystal Lake = Waukegan = Itasca

Bankruptcy Retainer Agreement OUR LAW FIRM IS A DEBT RELIEF AGENCY. WE HELP PEOPLE FILE FOR BANKRUPTCY RELIEF UNDER THE BANKRUPTCY CODE.

In consideration for services to be rendered to undersigned Client(s), ("Client") by Attorney, Newland & Newland, LLP, ("Attorney"), in connection with representing Client regarding bankruptcy matters, Client, jointly and severally, it is agreed as follows:

# FEES AND CHARGES FOR SERVICES AND TERMS OF PAYMENT

- is required at the time this Attorney accepts payment plans. An initial payment of \$ 1. Retainer Agreement is signed. The Retainer shall be applied to the balance owed and shall not be an additional fee. Client shall make monthly payments until paid in full. . Client understands that Attorney was paid on 2. A payment of \$ requires payment in full, including the court filing fee, prior to preparing Client's Bankruptcy Petition and filing same with the court. Client is required to complete a law mandated pre-bankruptcy credit counseling course and predischarge financial management course. Attorney works with an approved provider of the United States Department of Justice, (ACCESS). Attorney will provide Client with an instructional handout for completion of both required courses. Client is responsible for payment to ACCESS for both courses of \$15 for the 1st course and \$9 for the 2<sup>nd</sup> Course. Client is free to take any bankruptcy approved course.
- 4. Client acknowledges Attorney has explained the different types of retainers and based on that discussion Client, who has the sole right to decide the type of retainer has agreed the retainer shall be:
- \_\_\_\_a. A security retainer, where the funds are deposited into the Attorney's escrow account, without interest. Attorney shall provide client a billing statement when funds are drawn out of the account.
- An advance payment retainer, where the retainer is deposited directly into Attorney's business account and is considered the property of the Attorney. It is understood that this option is for Client's benefit as it is not subject to attachment by creditors.
- 5. If Client's income is from the operation of a business or as an independent contractor (1099), Attorney requires payment of a fee for preparation of a Business Attachment.

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- 6. Client understands that when Attorney is paid in full and Client has provided Attorney will all required forms and documents, Attorney will begin preparation of Client's petition.
- 7. Client understands that if after Client's Bankruptcy Petition is filed, Client notifies Attorney of a debt or any other information that was that was omitted by Client, Client agrees to pay Attorney \$100.00 for each amendment to Client's Bankruptcy Petition plus any costs charged by the Court.
- 8. Client understands that if any check given in payment to Attorney is returned for insufficient funds, Client agrees to immediately pay Attorney a \$40.00 fee in addition to the amount of the returned check. This payment and any future payments must therefore be made in cash or certified funds.

### Client's Schedule of Fees and Costs

| 0 | Attorney Fee for Preparation of Chapter 7 Case:   | \$          |
|---|---|-------------|
| • | Filing Fee (Chapter 7):                           | \$335.00    |
| • | Business Attachment:                              | \$          |
| • | Reaffirmation Agreement(s): \$100 each agreement  | \$ Included |
| • | Other costs: credit reports, courier fees & misc. | \$89.00     |
|   | TOTAL:  | s 2150      |

#### TERMS OF SERVICE

- 9. Attorney reserves the right to withdraw from Client representation if, among other things, Client fails to honor the terms of this Agreement, including non-payment of Attorney and court filing fees; Client fails to cooperate or follow advice on a material matter, or if any fact or circumstance arises or is discovered that would render continuing representation unlawful or unethical. Client is aware of an ethical requirement imposed upon all Attorneys in the State of Illinois and Attorney is an officer of the court. If a Client, in the course of representation by an Attorney, perpetrates a fraud upon any person or tribunal, the Attorney is obligated to call upon the Client to rectify the same.
- 10. Since the outcome of negotiations and litigation is subject to factors which cannot always be foreseen, Client acknowledges and understands that Attorney has made no promises or guarantees to Client concerning the outcome and is unable do so. Nothing in this Bankruptcy Retainer Agreement shall be construed as such a promise or guarantee.
- 11. Client agrees that Attorney may discard Client records within one (1) year of the completion of the Client's bankruptcy case.
- 12. Attorney shall provide Client with the following services:
  - a. Review and analyze Clients financial circumstances based on information provided by Client.
  - b. If possible and to the extent possible, based on the information provided by Client, advise Client of the Clients options, including but not limited to bankruptcy options.

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- c. Inform Client what information Client needs to provide Attorney in order to allow Attorney to provide appropriate advice and option information, in the event such information Client provided is insufficient.
- d. Advise Client of the appropriate requirements in connection with the filing of a Chapter 7 or Chapter 13 bankruptcy, including the duties of Client connected with such filing.
- e. Quote the Client an estimated fee, to the extent possible given the information provided by Client, for the Attorneys service relative to providing bankruptcy assistance or other legal services to Client.
- f. Assuming that a U.S. Bankruptcy proceeding is filed, Attorney services will include all typical Attorney required participation in such proceeding, including but not limited to, appearance at Client's 341 Meeting of Creditors, communications with Client's case trustee as well as the US Trustee, and communication with creditors, when appropriate.
- g. If Client's proceeding requires additional, but not customary work, Attorney will inform Client directly, and enter into a separate written contract for such services to fully apprise Client of the fees, payment requirements, and expected services to be provided. Attorney's hourly rate for non-customary work is \$300.
- 13. Client acknowledges his/her obligation to make full and complete disclosure of all assets and all liabilities, and to provide all documents and information requested by the Attorney, before the bankruptcy petition can be prepared and filed with the court.
- 14. CREDIT COUNSELING. Client acknowledges that he/she must attend pre-bankruptcy credit counseling before the bankruptcy petition can be filed. Client understands that he/she must also attend pre-discharge financial management course after the bankruptcy petition is filed and within the time frame allowed by statute. Client acknowledges that the bankruptcy cannot be filed without the certificate of completion of the pre-bankruptcy credit counseling. Client agrees to complete the pre-discharge course prior to Client's 341 Meeting of Creditors. Client further understands that no discharge of debts will be issued if the post-bankruptcy credit counseling is not completed within the statutory time frame.
- 15. Client acknowledges that Attorney does not represent Client in any other type of case, lawsuit or proceeding other than Clients bankruptcy case. The Attorney may make a special appearance in a court, other than the Bankruptcy Court, for the purpose of filing a notification of Clients bankruptcy proceedings, and to suggest to another court that Clients proceedings should be stayed. Sending or receiving any summons or complaint, or notifying the Attorney of a pending lawsuit does not obligate the Attorney to represent Client in that lawsuit or before that court. Any representation of Client in a state court proceeding, including without limitation: collection lawsuits, foreclosure lawsuits, and etc., is not included in this Bankruptcy Retainer Agreement. Any referral made to another Attorney to represent Client is a courtesy only. The Attorney is not associated with any other Attorney outside of the undersigned Attorneys law offices.
- 16. Client acknowledges that the Attorney will not research creditor information, including addresses, account numbers, or balances. The Client must provide this information to the Attorney in writing. Failure to do so may result in unscheduled debts subject to non-dischargeability.
- 17. Client agrees that the following matters are not included within the scope of this Bankruptcy Retainer Agreement. Client agrees that, as to the matters listed below, the Attorney will not take any action on Clients behalf, without a written request and/or a separate Retainer Agreement and possibly an additional retainer:

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- a. Motions to revoke a discharge.
- b. Removal of a pending action in another court.
- c. Obtaining title reports.
- d. The determination of real estate or tax liens.
- e. Appeals to the District Court of Court of Appeals.
- f. Correcting credit reports.
- g. Negotiations with Check Systems regarding Client.
- h. Motions to Discuss Client's bankruptcy case filed by the Trustee, U.S. Trustee, or any creditor.
- i. Any adversary proceeding filed by the Trustee, U.S. Trustee, or any other party on any basis, including, without limitations, proceedings to determine dischargability of debts.
- j. Negotiating reaffirmation agreements when Clients income is not sufficient to rebut the presumption of undue hardship and special circumstances do not warrant the signing of a reaffirmation agreement.
- k. Motions to redeem personal property.
- 1. Motion to impose or extend the bankruptcy stay.
- 18. LIENS. A Bankruptcy does not automatically discharge or remove liens from any real estate. Client agrees that the Attorney will not take any action to avoid (remove) any lien on real estate unless Client specifically authorizes the Attorney to do so in writing. Client agrees that the Attorney will rely on Clients statements concerning ownership of real property and any liens attached to Clients real property. Client agrees that no real estate title search will be conducted. Client agrees that Attorney will not conduct a public records search for lawsuits filed against Client or judgments granted against Client. Client must separately order and pay for a real estate title search, or public records search for lawsuits or judgments, if Clients wishes to obtain one. Client agrees to hold the Attorney harmless if client later discovers liens, lawsuits or judgments against Client or against Clients real estate.
- 19. Client understands that individuals who file for relief under Chapter 7 or Chapter 13 of the Bankruptcy Code are subject to audits by the U.S. Trustee. If Client's case is selected for an audit, Client agrees to pay. Attorney the customary hourly rate for representing Client in such audit.
- 20. Due to scheduling issues, Attorney may have an attorney outside of Attorney's firm attend the Client's 341 Meeting of Creditors and Client consents to said action.
- 21. The undersigned acknowledges agreement with the terms of the Bankruptcy Retainer Agreement.

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## **United States Bankruptcy Court** Northern District of Illinois

| In re | Xenofon Petridis<br>Stauriani Petridis   |                                       | Case No.  |    |  |  |
|-------|--|---------------------------------------|-----------|----|--|--|
|       |  | Debtor(s)                             | Chapter 7 |    |  |  |
|       | VERIFICATION OF CREDITOR MATRIX  |                                       |           |    |  |  |
|       |  | Number of Creditors:                  |           | 12 |  |  |
|       | The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of m (our) knowledge. |                                       |           |    |  |  |
| Date: | January 25, 2016   | /s/ Xenofon Petridis Xenofon Petridis |           |    |  |  |
|       |  | Signature of Debtor                   |           |    |  |  |
| Date: | January 25, 2016   | /s/ Stauriani Petridis                |           |    |  |  |
|       |  | Stauriani Petridis                    |           |    |  |  |
|       |  | Signature of Debtor                   |           |    |  |  |

Barclays Bank Delaware Attn: Bankruptcy P.O. Box 8801 Wilmington, DE 19899

Citibank Sd, Na Attn: Centralized Bankruptcy Po Box 20363 Kansas City, MO 64195

Fifth Third Bank Fifth Third Bank Bankruptcy Department, 1830 East Paris Ave. Se Grand Rapids, MI 49546

Higgins Law Office
Michael Brancheau
200 West Adams Street #2220
Chicago, IL 60606-5231

Huntington Natl Bk Bankruptcy Notice Po Box 89424 Cleveland, OH 44101

Illinois Collection Service/ICS Illinois Collection Service Po Box 1010 Tinley Park, IL 60477

MB Financial Bank 6111 N River Road Des Plaines, IL 60018

Med Business Bureau Po Box 1219 Park Ridge, IL 60068

National Bank Of Az 6001 N 24th St Phoenix, AZ 85016

Ocwen Loan Servicing PO Box 24738 West Palm Beach, FL 33416-4738

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Specialized Loan Servi Attn: Bankruptcy 8742 Lucent Blvd. Suite 300 Highlands Ranch, CO 80129

Us Bank 4325 17th Ave S Fargo, ND 58125